

# 2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000021629

**FILED**  
**Dec 06, 2006**  
**Secretary of State**

**Entity Name:** HOMEWORKS RECOVERY SERVICES, LLC

**Current Principal Place of Business:**

517 7TH AVENUE NORTH  
JACKSONVILLE BEACH, FL 32250 US

**New Principal Place of Business:**

**Current Mailing Address:**

517 7TH AVENUE NORTH  
JACKSONVILLE BEACH, FL 32250 US

**New Mailing Address:**

**FEI Number:** 20-3035599

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RUSSO, CYNTHIA H MS.  
517 7TH AVENUE NORTH  
JACKSONVILLE BEACH, FL 32250 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: RUSSO, CYNTHIA H  
Address: 517 7TH AVENUE NORTH  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: MGRM ( ) Delete  
Name: VESCE, VICTORIA L  
Address: 2095 EL-LAGO WAY  
City-St-Zip: JACKSONVILLE, FL 32224

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGMR (X) Change ( ) Addition  
Name: VESCE, VICTORIA L  
Address: 2095 EL-LAGO WAY  
City-St-Zip: JACKSONVILLE, FL 32224

Title: MGMR ( ) Change (X) Addition  
Name: SHACTER, JOSEPH B  
Address: 2930 STARSHIRE COVE  
City-St-Zip: JACKSONVILLE, FL 32223

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** CYNTHIA H. RUSSO

MGR

12/06/2006

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date