

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000043224

**FILED**  
**Jan 24, 2007**  
**Secretary of State**

**Entity Name:** HOMEPRIDE SERVICES, LLC

**Current Principal Place of Business:**

1100 CROSSWINDS LANDING  
UNIT # 10  
FORT WALTON BEACH, FL 32547 US

**New Principal Place of Business:**

**Current Mailing Address:**

1100 CROSSWINDS LANDING  
UNIT # 10  
FORT WALTON BEACH, FL 32547 US

**New Mailing Address:**

**FEI Number:** 32-0148511      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

BREWINGTON, WILLIAM A JR.  
1100 CROSSWINDS LANDING  
UNIT #10  
FORT WALTON BEACH, FL 32547 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: MR ( ) Delete  
Name: BREWINGTON, WILLIAM A JR  
Address: 1100 CROSSWINDS LANDING UNIT 10  
City-St-Zip: FORT WALTON BEACH, FL 32547

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: BREWINGTON, WILLIAM A JR  
Address: 1100 CROSSWINDS LANDING UNIT 10  
City-St-Zip: FORT WALTON BEACH, FL 32547

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: WILLIAM BREWINGTON

MGR

01/24/2007

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