2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 20, 2008
Secretary of State

DOCUMENT# L05000043224

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:

117 PAMELA ANN DR.
FORT WALTON BEACH, FL 32547 US

Current Mailing Address:

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

New Mailing Address:

117 PAMELA ANN DR.
FORT WALTON BEACH, FL 32547 US

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

Name and Address of Current Registered Agent:

BREWINGTON, WILLAIM A JR.
1100 CROSSWINDS LANDING
UNIT #10
FORT WALTON BEACH, FL 32547 US

Name and Address of New Registered Agent:

BREWINGTON, WILLAIM A JR.
117 PAMELA ANN DR
FORT WALTON BEACH, FL 32547 US

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: WILLIAM A. BREWINGTON, JR 03/20/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) 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: 117 PAMELA ANN DR.
City-St-Zip: FORT WALTON BEACH, FL 32547

I hereby certify that the information supplied with this filing does not qualify 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 A. BREWINGTON, JR MGR 03/20/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date