

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000045498

**FILED**  
**Apr 13, 2011**  
**Secretary of State**

**Entity Name:** HOMESAFE PARTNERS, LLC

**Current Principal Place of Business:**

825 18TH STREET  
200  
VERO BEACH, FL 32960

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 644150  
VERO BEACH, FL 32964

**New Mailing Address:**

**FEI Number:** 20-2802559

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GARAVAGLIA, MICHAEL J  
756 BEACHLAND BOULEVARD  
VERO BEACH, FL 32963 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  
**Name:** BARNETT, STEVEN  
**Address:** POST OFFICE BOX 644150  
**City-St-Zip:** VERO BEACH, FL 32964

**Title:** MGR  
**Name:** BLANE, W. CHRIS  
**Address:** POST OFFICE BOX 644150  
**City-St-Zip:** VERO BEACH, FL 32964

I hereby 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:** YVONNE F. ROKAW

OFM

04/13/2011

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