

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000068616

FILED
May 02, 2008
Secretary of State

Entity Name: HOUSING RESOLUTIONS, LLC

Current Principal Place of Business:

580 GEORGE STREET SOUTH
TARPON SPRINGS, FL 34688

New Principal Place of Business:

Current Mailing Address:

PO BOX 1183
TARPON SPRINGS, FL 34688

New Mailing Address:

FEI Number: 55-0903922 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

STORNANT, KRISTINE M OWNER
580 GEORGE STREET SOUTH
TARPON SPRINGS, FL 34688 US

Name and Address of New Registered Agent:

EVANS, KRISTINE M OWNER
580 GEORGE STREET SOUTH
TARPON SPRINGS, FL 34688 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: KRISTINE M. EVANS

05/02/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: STORNANT, KRISTINE M OWNER
Address: 580 GEORGE STREET SOUTH
City-St-Zip: TARPON SPRINGS, FL 34688

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: EVANS, KRISTINE M OWNER
Address: 580 GEORGE STREET SOUTH
City-St-Zip: TARPON SPRINGS, FL 34688

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: KRISTINE M. EVANS

MGR.

05/02/2008

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