

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000074155

FILED  
Jul 17, 2008  
Secretary of State

**Entity Name:** HOME HELP FORECLOSURE SOLUTIONS, LLC

**Current Principal Place of Business:**

PO BOX 2112  
LAKELAND, FL 33806

**New Principal Place of Business:**

4415 FLORIDA NATIONAL DR  
LAKELAND, FL 33806

**Current Mailing Address:**

PO BOX 2112  
LAKELAND, FL 33806

**New Mailing Address:**

**FEI Number:** 20-3232142      **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:**

OSMON, CHRIS  
2768 HIGH RIDGE DR  
LAKELAND, FL 33813      US

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

OSMON, CHRIS  
4415 FLORIDA NATIONAL DR  
LAKELAND, FL 33803      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: CHRIS OSMON

07/17/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: OSMON, CHRIS  
Address: PO BOX 2112  
City-St-Zip: LAKELAND, FL 33806

Title: MGRM      (X) Delete  
Name: OSMON, STACEY  
Address: PO BOX 2112  
City-St-Zip: LAKELAND, FL 33806

**ADDITIONS/CHANGES:**

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

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

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: CHRIS OSMON

MGMR

07/17/2008

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