2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

Jul 10, 2007 08:00 AM DOCUMENT # L05000098334 **Secretary of State** 1. Entity Name HABITAT BUILDERS, LLC Principal Place of Business Mailing Address 1826 NW 57TH TERRACE 1826 NW 57TH TERRACE GAINESVILLE, FL 32605 US GAINESVILLE, FL 32605 US 07092007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 30-0338418 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BRUDERLY, DAVID R DO NOT WRITE 1826 NW 57TH TERRACE GAINESVILLE, FL 32605 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by September 14, 2007 9. MANAGING MEMBERS/MANAGERS MGR TITLE BRUDERLY, DAVID R NAME: 1826 NW 57TH TERRACE STREET ADDRESS GAINESVILLE, FL 32605 CITY-ST-ZIP U00000767540 07/10/07-80008-024 50.00 NAME STREET ADDRESS CITY-ST-ZIP TILE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TRLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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