

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000109481

FILED  
Jul 03, 2006  
Secretary of State

**Entity Name:** HARMONIC HOME SOLUTIONS, LLC

**Current Principal Place of Business:**

12106 FRONT BEACH ROAD  
PANAMA CITY BEACH, FL 32407 US

**New Principal Place of Business:**

4009 DOLPHIN DRIVE  
B  
PANAMA CITY BEACH, FL 32408 US

**Current Mailing Address:**

P.O. BOX 19558  
PANAMA CITY BEACH, FL 32417 US

**New Mailing Address:**

FEI Number: 76-0811386      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:**

STEVEN, DUFF  
12106 FRONT BEACH ROAD  
PANAMA CITY BEACH, FL 32407 US

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

STEVEN, DUFF  
4009 DOLPHIN DRIVE  
B  
PANAMA CITY BEACH, FL 32408 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: STEVEN DUFF

07/03/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: STEVEN, DUFF  
Address: 12106 FRONT BEACH ROAD  
City-St-Zip: PANAMA CITY BEACH, FL 32407 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: STEVEN, DUFF  
Address: 4009 B DOLPHIN DRIVE  
City-St-Zip: PANAMA CITY BEACH, FL 32408 US

I hereby certify that the information supplied with this filing does not qualify for the 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: STEVEN DUFF

MGR

07/03/2006

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