

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000110398

FILED
Aug 14, 2007
Secretary of State

Entity Name: TREY HARRIS HOMES, LLC

Current Principal Place of Business:

2794 WILLOW BAY TERRACE
CASSELBERRY, FL 32707

New Principal Place of Business:

Current Mailing Address:

2794 WILLOW BAY TERRACE
CASSELBERRY, FL 32707

New Mailing Address:

FEI Number: 76-0805516 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:

Name and Address of New Registered Agent:

HARRIS, CHARLES
2794 WILLOW BAY TERRACE
CASSELBERRY, FL 32707 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HARRIS, CHARLES
Address: 2794 WILLOW BAY TERRACE
City-St-Zip: CASSELBERRY, FL 32707

Title: MGRM () Delete
Name: HARRIS, CHRISTA
Address: 2794 WILLOW BAY TERRACE
City-St-Zip: CASSELBERRY, FL 32707

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: HARRIS, CRISTA
Address: 2794 WILLOW BAY TERRACE
City-St-Zip: CASSELBERRY, FL 32707

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: CHARLES HARRIS

MGRM

08/14/2007

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