2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000116930

1. Entity Name
J&W HOME SOLUTIONS LLC



FILED Jan 23, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

1601 PADDOCK DRIVE PLANT CITY, FL 33566 1601 PADDOCK DRIVE PLANT CITY, FL 33566



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

01152007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-3957278

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

HARTMAN, WILBUR F 1601 PADDOCK DRIVE PLANT CITY, FL 33566

DO NOT WRITE 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 apokcable.	(NOTE; Regulered Agent signature required when reinstaling)	DATE
F	iling Fee is \$50.00 ue by May 1, 2007	(144 F. Leibireach Vier, still aride and mean mean burnant)	UNIE
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HARTMAN, WILBUR F 1601 PADDOCK DRIVE PLANT CITY, FL 33566		
TITLE NAME STREET ADDRESS CATY-ST-ZIP	MGRM HARTMAN, JULIA L 1601 PADOCK DRIVE PLANT CITY, FL 33566		U00000599764 01/25/07-80041-005 55.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY ST. 718		IN	THIS SPACE

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: _

ITTLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Willew & Hartin

1-15-07 813-707-919

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

Date

Daytime Phone #