

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000002133

**FILED**  
**Jan 04, 2012**  
**Secretary of State**

**Entity Name:** STORMTROOPERS HOME IMPROVEMENT L.L.C

**Current Principal Place of Business:**

2919 SE CATES CIR.  
PORT ST LUCIE, FL 34952 US

**New Principal Place of Business:**

**Current Mailing Address:**

2919 SE CATES CIR.  
PORT ST LUCIE, FL 34952 US

**New Mailing Address:**

**FEI Number:** 20-4053668

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HENDRIKS, L. PAUL JR  
2919 SE CATES CIR.  
PORT ST LUCIE, FL 34952 US

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

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: P  
Name: HENDRIKS, L. PAUL JR  
Address: 2919 SE CATES CIR.  
City-St-Zip: PORT ST LUCIE, FL 34952 US

I hereby 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: L. PAUL HENDRIKS, JR

PRES

01/04/2012

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