2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000027714

Name:

Address:

City-St-Zip:

Entity Name: CHRIS WARREN HOME IMPROVEMENTS, LLC

FILED May 21, 2008 Secretary of State

| Current Principal Place of Business: | | | New Principal Place of Business: | | | |
|---|---|---|---|--------------------------|---|--|
| | LNEST LANE RNA, FL 32168 | US | | | | |
| Current Mailing Address: | | | New Mailing Address: | | | |
| 1311 TURNBULL ST. LOT #86 NEW SMYRNA, FL 32168 US | | | 101 HANDLEY DRIVE NEW SMYRNA, FL 32168 US | | | |
| | e with s. 607.193(2)(| El Number Applied For() FEI Nur b), F.S., the limited liability company did ent Registered Agent: | | prior notice | Certificate of Status Desired () f New Registered Agent: | |
| WARREN, CHRISTOPHER M SR. 1311 TURNBULL ST. LOT # 86 NEW SMYRNA, FL 32168 US | | | WARREN, CHRISTOPHER M SR. 101 HANDLEY DRIVE NEW SMYRNA, FL 32168 US | | | |
| The above in the State | | nits this statement for the purpose o | f changing it | s registered | d office or registered agent, or both | |
| SIGNATURE: CHRISTOPHER WARREN SR. | | | | 05/21/2008 | | |
| | Electronic S | ignature of Registered Agent | | | Date | |
| MANAGING MEMBERS/MANAGERS: | | | ADDITIONS/CHANGES: | | | |
| Title: Name: Address: City-St-Zip: | MGRM () Dele WARREN, CHRISTO 1311 TURNBULL ST NEW SMYRNA, FL | PHER M SR. REET, LOT 86 | Title: Name: Address: City-St-Zip: | WARREN, C 101 HANDLE | (X) Change()Addition HRISTOPHER M SR. EY DRIVE NA, FL 32168 US | |
| Title: Name: Address: City-St-Zip: | MGRM () Dele WARREN, JOEL M 1311 TURNBULL ST NEW SMYRNA, FL | . LOT #86 | Title: Name: Address: City-St-Zip: | WARREN, D | US1 LOT #23 | |
| Title: Name: Address: City-St-Zip: | () Dele | ete | Title: Name: Address: City-St-Zip: | ROLLS, TRE 101 HANDLE | | |
| Title: Name: Address: City-St-Zip: | () Dele | ete | Title: Name: Address: City-St-Zip: | DETWEILER 101 HANDLE | | |
| Title: | () Dele | ete | Title: | MGRM | () Change (X) Addition | |

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.

Name:

Address:

City-St-Zip:

WARREN, CLELAND L JR.

PALM COAST, FL 32137

7 B LYNN PLACE

SIGNATURE: CHRISTOPHER WARREN SR. MGRM 05/21/2008