

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000027714

FILED
Apr 28, 2009
Secretary of State

Entity Name: CHRIS WARREN HOME IMPROVEMENTS, LLC

Current Principal Place of Business:

4017 QUAILNEST LANE
NEW SMYRNA, FL 32168 US

New Principal Place of Business:

Current Mailing Address:

101 HANDLEY DRIVE
NEW SMYRNA, FL 32168 US

New Mailing Address:

2519 FERN PALM DRIVE
EDGEWATER, FL 32141 US

FEI Number: 20-4517048

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WARREN, CHRISTOPHER M SR.
101 HANDLEY DRIVE
NEW SMYRNA, FL 32168 US

Name and Address of New Registered Agent:

WARREN, JILL E
2519 FERN PALM DRIVE
EDGEWATER, FL 32141 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: JILL WARREN

04/28/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WARREN, CHRISTOPHER M SR.
Address: 101 HANDLEY DRIVE
City-St-Zip: NEW SMYRNA, FL 32168 US

Title: MGRM () Delete
Name: WARREN, DUSTIN W
Address: 440 SOUTH US1 LOT #23
City-St-Zip: OAKHILL, FL 32759 US

Title: MGRM (X) Delete
Name: ROLLS, TREVOR W
Address: 101 HANDLEY DRIVE
City-St-Zip: NEW SMYRNA, FL 32168

Title: MGRM (X) Delete
Name: DETWEILER, STANLEY
Address: 101 HANDLEY DRIVE
City-St-Zip: NEW SMYRNA, FL 32168

Title: MGRM (X) Delete
Name: WARREN, CLELAND L JR.
Address: 7 B LYNN PLACE
City-St-Zip: PALM COAST, FL 32137

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WARREN, JILL E
Address: 2519 FERN PALM DRIVE
City-St-Zip: EDGEWATER, FL 32141 US

Title: MGRM (X) Change () Addition
Name: ROLLS, TREVOR W
Address: 2519 FERN PALM DRIVE
City-St-Zip: EDGEWATER, FL 32141 US

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

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

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

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: JILL E. WARREN

MGRM

04/28/2009

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