

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 25, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000038671

1. Entity Name
HOME INVESTMENT MANAGEMENT, LLC



Principal Place of Business
**2744 US 1 SOUTH
ST. AUGUSTINE, FL 32086**

Mailing Address
**8721 SANTA MONICA BLVD
PMB B837
LOS ANGELES, CA 93064**



02222008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-4907723

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**HORN, CHERYL
104 11TH STREET A
ST. AUGUSTINE, FL 32080**

**DO NOT WRITE
IN THIS SPACE**

B. 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 applicable

(NOTE: Registered Agent signature required when renewing)

DATE

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
STEVENS, JOHN
200 IRONWOOD DR
PONTE VEDRA BEACH, FL 32082**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
ARNIS, CHARLES S
2744 US 1 PATH
SAINT AUGUSTINE, FL 32086**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

L000000835640
02/29/08-80042-013-138.75

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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:

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

Date 2/22/08 Daytime Phone #