

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000042869

FILED  
Apr 08, 2009  
Secretary of State

Entity Name: T & A HOME REPAIRS LLC

**Current Principal Place of Business:**

9492 COUNTY ROAD 649  
BUSHNELL, FL 33513

**New Principal Place of Business:**

**Current Mailing Address:**

9492 COUNTY ROAD 649  
BUSHNELL, FL 33513

**New Mailing Address:**

FEI Number: 32-0280137      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

WATERS, AMANDA  
9492 COUNTY ROAD 649  
BUSHNELL, FL 33513    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: MGRM ( ) Delete  
Name: CATTELL, THOMAS  
Address: 9492 COUNTY ROAD 649  
City-St-Zip: BUSHNELL, FL 33513

Title: MGRM (X) Delete  
Name: WATERS, AMANDA  
Address: 9492 COUNTY ROAD 649  
City-St-Zip: BUSHNELL, FL 33513

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: CATTELL, THOMAS P  
Address: 9492 COUNTY ROAD 649  
City-St-Zip: BUSHNELL, FL 33513

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: THOMAS P CATTELL

MGRM

04/08/2009

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