2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000073022

Entity Name: NEXGEN HOME SERVICES, LLC

FILED Jan 16, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Finicipal Flace of Dusiness.	New Fillicipal Flace of Dusiliess.

250 AVENUE K, S.W., SUITE 10 3020 S. FLORIDA AVENUE, SUITE 101

WINTER HAVEN, FL 33880 LAKELAND, FL 33803

Current Mailing Address: New Mailing Address:

250 AVENUE K, S.W., SUITE 10 WINTER HAVEN, FL 33880 3020 S. FLORIDA AVENUE, SUITE 101

LAKELAND, FL 33803

FEI Number: 20-5260399 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

STRAUGHN & TURNER PA 255 MAGNOLIA AVE SW WINTER HAVEN, FL 33880

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: ADDITIONS/CHANGES:

() Delete Title: () Change () Addition

CASSIDY, ALBERT B Name: Name: Address: 250 AVENUE K, S.W., SUITE 10 Address: City-St-Zip: WINTER HAVEN, FL 33880 City-St-Zip:

US

Title: MGR () Delete Title: () Change () Addition

Name: ADAMS, ROBERT J Name: Address: 3020 SOUTH FLORIDA AVE., SUITE 101 Address: City-St-Zip: LAKELAND, FL 33803 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: ROBERT J. ADAMS 01/16/2009