

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000075198

FILED
Mar 02, 2007
Secretary of State

Entity Name: WHOLESALHOMEDEPOT LLC

Current Principal Place of Business:

6314 CORPORATE CT.
SUITE C
FORT MYERS, FL 33919 US

New Principal Place of Business:

Current Mailing Address:

6314 CORPORATE CT.
SUITE C
FORT MYERS, FL 33919 US

New Mailing Address:

FEI Number: 61-1522748 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SCHAFER, ANTHONY R
9711 LAS CASAS DR.
FORT MYERS, FL 33919 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: MGR () Delete
Name: SCHAFER, ANTHONY R
Address: 9711 LAS CASAS DR.
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: ANTHONY SCHAFER

MGR

03/02/2007

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