

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000076646

Entity Name: HOME REMEDIES, LLC

FILED
Jan 05, 2007
Secretary of State

Current Principal Place of Business:

2230 SAW PALMETTO LANE #101
ORLANDO, FL 32828

New Principal Place of Business:

2230 SAW PALMETTO LANE
#101
ORLANDO, FL 32828

Current Mailing Address:

2230 SAW PALMETTO LANE #101
ORLANDO, FL 32828

New Mailing Address:

2230 SAW PALMETTO LANE
#101
ORLANDO, FL 32828

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NOVAK, JAMES H
2230 SAW PALMETTO LANE #101
ORLANDO, FL 32828 US

Name and Address of New Registered Agent:

NOVAK, JAMES H
2230 SAW PALMETTO LANE
#101
ORLANDO, FL 32828 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:

01/05/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: NOVAK, JAMES H
Address: 2230 SAW PALMETTO LANE #101
City-St-Zip: ORLANDO, FL 32828

Title: MGR () Delete
Name: NOVAK, ROGER
Address: 2420 EDGEHILL ROAD
City-St-Zip: SALINA, KS 67401

ADDITIONS/CHANGES:

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 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: JAMES H NOVAK

MGRM

01/05/2007

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