

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000083633

FILED
Feb 15, 2007
Secretary of State

Entity Name: ENHANCED HOUSING SOLUTIONS, LLC

Current Principal Place of Business:

3635 US HIGHWAY 92 EAST, STE. 200
LAKELAND, FL 33801

New Principal Place of Business:

2225 EAST EDGEWOOD DRIVE, #12
LAKELAND, FL 33803

Current Mailing Address:

3635 US HIGHWAY 92 EAST, STE. 200
LAKELAND, FL 33801

New Mailing Address:

PO BOX 6205
LAKELAND, FL 33807

FEI Number: 16-1771002

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MUNSON, PETER J
1501 SOUTH FLORIDA AVENUE
LAKELAND, FL 33803 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: PALMER, LYNN K
Address: 3635 US HIGHWAY 92 EAST, STE. 200
City-St-Zip: LAKELAND, FL 33801

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: KIMBEL, MARK L
Address: 2225 EAST EDGEWOOD DRIVE, #12
City-St-Zip: LAKELAND, FL 33803

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: MARK L KIMBEL

MGR

02/15/2007

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