## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L06000102366

Entity Name: RENOVATIONS, LLC

FILED Mar 28, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

507 FELLS COURT 507 FELLS COURT

GREEN COVE SPRINGS, FL 32043 GREEN COVE SPRINGS, FL 32043 US

Current Mailing Address: New Mailing Address:

507 FELLS COURT 507 FELLS COURT

GREEN COVE SPRINGS, FL 32043 GREEN COVE SPRINGS, FL 32043 US

FEI Number: 83-0468112 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:

BRIM, KRISTA 507 FELLS COURT GREEN COVE SPRINGS, FL 32043 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:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

 Name:
 BRIM, KRISTA
 Name:
 BRIM, KRISTA

 Address:
 507 FELLS COURT
 Address:
 507 FELLS COURT

City-St-Zip: GREEN COVE SPRINGS, FL 32043 City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

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

 Name:
 BRIM, STEVEN A
 Name:
 BRIM, STEVEN A

 Address:
 507 FELLS COURT
 Address:
 507 FELLS COURT

City-St-Zip: GREEN COVE SPRINGS, FL 32043 City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

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: KRISTA BRIM MGR 03/28/2007