## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L06000107436

**Current Principal Place of Business:** 

Entity Name: HOME FOUR, LLC

**FILED** Apr 19, 2007 Secretary of State

Date

9370 SUNSET DRIVE, SUITE A-100

MIAMI, FL 33173

9370 SUNSET DRIVE, SUITE A-100 MIAMI, FL 33173 **Current Mailing Address: New Mailing Address:** 9370 SUNSET DRIVE, SUITE A-100 MIAMI, FL 33173 FEI Number: 20-8547069 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: PONS, MARTIN E 9370 ŚUNSET DRIVE, SUITE A-100 MIAMI, FL 33173 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

**New Principal Place of Business:** 

ADDITIONS/CHANGES:

## MANAGING MEMBERS/MANAGERS:

Address:

City-St-Zip:

Title: MGRM (X) Change ( ) Addition () Delete CARRILLO, LUIS E PONS, MARTIN E Name: Name: Address: 9370 SUNSET DRIVE, SUITE A-100 Address: 9370 SUNSET DRIVE, SUITE A-100 MIAMI, FL 33173 City-St-Zip: City-St-Zip: MIAMI, FL 33173 Title: Title: MGR ( ) Change (X) Addition ( ) Delete Name: Name: CARRILLO, YVETTE Address: Address: 9370 SUNSET DRIVE, SUITE A-100 City-St-Zip: City-St-Zip: MIAMI, FL 33173 Title: () Delete Title: MGR ( ) Change (X) Addition DANIEL, NICHOLAS Name: Name: 9370 SUNSET DRIVE, SUITE A-100 Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33173 Title: () Delete Title: MGR ( ) Change (X) Addition Name: Name: SALGADO, MARITA

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.

Address:

City-St-Zip:

SIGNATURE: MARTIN E. PONS 04/19/2007