

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000006753

FILED
Jul 10, 2008
Secretary of State

Entity Name: FRESHSTART HOMEBUYERS, LLC

Current Principal Place of Business:

3009 FOLKLORE DRIVE
VALRICO, FL 33594 US

New Principal Place of Business:

3009 FOLKLORE DRIVE
VALRICO, FL 33596 US

Current Mailing Address:

3009 FOLKLORE DRIVE
VALRICO, FL 33594 US

New Mailing Address:

3009 FOLKLORE DRIVE
VALRICO, FL 33596 US

FEI Number: 20-8275849 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

PHELPS, SEAN
3009 FOLKLORE DRIVE
VALRICO, FL 33594 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: MGRM () Delete
Name: PHELPS, SEAN
Address: 3009 FOLKLORE DRIVE
City-St-Zip: VALRICO, FL 33594 US

Title: MGRM () Delete
Name: HARBOUR, BRENT M
Address: 15307 PALOMA PARK LANE
City-St-Zip: LITHIA, FL 33547 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: PHELPS, SEAN M
Address: 3009 FOLKLORE DRIVE
City-St-Zip: VALRICO, FL 33594 US

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

I hereby certify that the information supplied with this filing does not qualify 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: SEAN M PHELPS

MGRM

07/10/2008

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