

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000008633

Entity Name: HOME & CASTLE LLC

FILED  
Jan 15, 2008  
Secretary of State

## Current Principal Place of Business:

14936 TULLAMORE LOOP  
WINTER GARDEN, FL 34787

## New Principal Place of Business:

14936 TULLAMORE LOOP  
WINTER GARDEN, FL 34787

## Current Mailing Address:

14936 TULLAMORE LOOP  
WINTER GARDEN, FL 34787

## New Mailing Address:

14936 TULLAMORE LOOP  
WINTER GARDEN, FL 34787

FEI Number: 20-8297427

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA PA  
1840 SOUTHWEST 22 STREET 4TH FLOOR  
MIAMI, FL 33145 US

## Name and Address of New Registered Agent:

HARLEY, ROBERT E  
14936 TULLAMORE LOOP  
WINTER GARDEN, FL 34787 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: ROBERT E HARLEY

01/15/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: HARLEY, ROBERT  
Address: 14936 TULLAMORE LOOP  
City-St-Zip: WINTER GARDEN, FL 34787

Title: MGR ( ) Delete  
Name: HARLEY, ADRIANA  
Address: 14936 TULLAMORE LOOP  
City-St-Zip: WINTER GARDEN, FL 34787

## 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 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: ROBERT E HARLEY

MGR

01/15/2008

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