

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000046187

**FILED**  
**Mar 29, 2010**  
**Secretary of State**

**Entity Name:** GOFF'S TOTAL HOME INSPECTION LLC

**Current Principal Place of Business:**

175 CLUB VILLAS LN  
KISSIMMEE, FL 34744 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 450494  
KISSIMMEE, FL 34745 US

**New Mailing Address:**

**FEI Number:** 51-0634696

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GOFF, MARION N  
175 CLUB VILLAS LN  
KISSIMMEE, FL 34744 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  
Name: GOFF, MARION N  
Address: 175 CLUB VILLAS LN  
City-St-Zip: KISSIMMEE, FL 34744 US

Title: MGRM  
Name: VASQUEZ-GOFF, JANICE S  
Address: 175 CLUB VILLAS LN  
City-St-Zip: KISSIMMEE, FL 34744 US

I hereby 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: MARION N GOFF

MGRM

03/29/2010

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