

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000103813

FILED  
Mar 16, 2009  
Secretary of State

Entity Name: SOLUTIONS FOR TODAY'S HOMEOWNER, LLC

## Current Principal Place of Business:

11125 PARK BLVD  
SUITE 104-303  
SEMINOLE, FL 33772 US

## New Principal Place of Business:

10801 STARKEY ROAD  
SUITE 104-233  
SEMINOLE, FL 33777 US

## Current Mailing Address:

11125 PARK BLVD  
SUITE 104-303  
SEMINOLE, FL 33772 US

## New Mailing Address:

10801 STARKEY ROAD  
SUITE 104-233  
SEMINOLE, FL 33777 US

FEI Number: 32-0233400

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROBERTS, RICHARD  
11125 PARK BLVD  
SUITE 104-303  
SEMINOLE, FL 33772 US

## Name and Address of New Registered Agent:

ROBERTS, RICHARD  
10801 STARKEY ROAD  
SUITE 104-233  
SEMINOLE, FL 33777 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:

03/16/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: ROBERTS, RICHARD  
Address: 11125 PARK BLVD, SUITE 104-303  
City-St-Zip: SEMINOLE, FL 33772 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: ROBERTS, RICHARD  
Address: 10801 STARKEY ROAD SUITE 104233  
City-St-Zip: SEMINOLE, FL 33777 US

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: RICHARD ROBERTS

MGRM

03/16/2009

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