2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 10, 2009
Secretary of State

DOCUMENT# L07000114487

Entity Name: T. K. HOME REPAIR SERVICES, LCC

Current Principal Place of Business:

23821 CAPE MONACO RD
BONITA SPRINGS, FL 34135 US

New Principal Place of Business:

20020 BARLETTA LANE
UNIT 521
ESTERO, FL 33928 US

Current Mailing Address:

23821 CAPE MONACO RD
BONITA SPRINGS, FL 34135 US

New Mailing Address:

20020 BARLETTA LANE
UNIT 521
ESTERO, FL 33928 US

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MISCAVAGE, KAREN L
23821 CAPE MONACO RD
BONITA SPRINGS, FL 34135 US

Name and Address of New Registered Agent:

MISCAVAGE, KAREN L
20020 BARLETTA LANE
UNIT 521
ESTERO, FL 33928 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: 04/10/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: MISCAVAGE, KAREN L
Address: 23821 CAPE MONACO RD.
City-St-Zip: BONITA SPRINGS, FL 34135 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: MISCAVAGE, KAREN L
Address: 20020 BARLETTA LANE
City-St-Zip: ESTERO, FL 33928 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: KAREN L. MISCAVAGE MGRM 04/10/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date