

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000115884

**FILED**  
**Mar 30, 2009**  
**Secretary of State**

**Entity Name:** BETTER BUILT HOMES OF FLORIDA USA, LLC

**Current Principal Place of Business:**

7600 SOUTHLAND BOULEVARD, SUITE 100  
ORLANDO, FL 32809

**New Principal Place of Business:**

**Current Mailing Address:**

7600 SOUTHLAND BOULEVARD, SUITE 100  
ORLANDO, FL 32809

**New Mailing Address:**

**FEI Number:** 32-0222849

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SLOANE, JEREMY S ESQ  
ZIMMERMAN, KISER & SUTCLIFFE, P.A.  
315 E. ROBINSON STREET, SUITE 600  
ORLANDO, FL 32801 US

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

WETTACH, JOSEPH C.L. ESQ  
C/O ZIMMERMAN, KISER & SUTCLIFFE, P.A.  
315 E. ROBINSON STREET, SUITE 600  
ORLANDO, FL 32801 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: /JOSEPH C.L. WETTACH/

03/30/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MARSAN, JEAN  
Address: 7600 SOUTHLAND BOULEVARD, SUITE 100  
City-St-Zip: ORLANDO, FL 32809

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: MARSAN, JEAN  
Address: 7600 SOUTHLAND BOULEVARD, SUITE 100  
City-St-Zip: ORLANDO, FL 32809

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: /JEAN MARSAN/

MGR

03/30/2009

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