

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000015099

FILED  
Apr 27, 2009  
Secretary of State

**Entity Name:** RON'S HOME MAINTENANCE & REPAIR, LLC

**Current Principal Place of Business:**

20521 HOMOSSASA CT.  
LAND-O-LAKES, FL 34637

**New Principal Place of Business:**

20521 HOMOSASSA CT.  
LAND-O-LAKES, FL 34637

**Current Mailing Address:**

20521 HOMOSSASA CT.  
LAND-O-LAKES, FL 34637

**New Mailing Address:**

20521 HOMOSASSA CT.  
LAND-O-LAKES, FL 34637

**FEI Number:** 80-0397316

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

APP, RONALD D SR.  
20521 HOMOSSASA  
LAND-O-LAKES, FL 34637 US

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

APP, RONALD D SR.  
20521 HOMOSASSA  
LAND-O-LAKES, FL 34637 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:

04/27/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: APP, RONALD D SR.  
Address: 20521 HOMOSSASA CT.  
City-St-Zip: LAND-O-LAKES, FL 34637

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: APP, RONALD D SR.  
Address: 20521 HOMOSASSA CT.  
City-St-Zip: LAND-O-LAKES, FL 34637

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: RONALD D. APP

MGR.

04/27/2009

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