2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000056075

Entity Name: WESTON HOME SERVICES, LLC.

FILED Apr 28, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

318 INDIAN TRACE #532 318 INDIAN TRACE WESTON, FL 33326

#532

WESTON, FL 33326

Current Mailing Address: New Mailing Address:

318 INDIAN TRACE #532 318 INDIAN TRACE WESTON, FL 33326

#532

WESTON, FL 33326

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

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

ROGGE, MARK A ROGGE, MARK A MGRM 318 INDÍAN TRACE #532 318 INDÍAN TRACE

WESTON, FL 33326 #532 WESTON, FL 33326 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: MARK ROGGE 04/28/2009

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: (X) Change () Addition () Delete

ROGGE, MARK A ROGGE, MARK A MGRM Name: Name: Address: 318 INDIAN TRACE #532 Address: 318 INDIAN TRACE #532 City-St-Zip: WESTON, FL 33326 US City-St-Zip: WESTON, FL 33326 US

Title: () Delete Title: () Change (X) Addition Name: Name: DEBORAH, ROGGE M MGRM Address: Address: 318 INDIAN TRACE #532 City-St-Zip: City-St-Zip: WESTON, FL 33326

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: MARK ROGGE **MGRM** 04/28/2009