

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000089976

Entity Name: HOME PLACE REALTY, LLC

FILED
Mar 13, 2009
Secretary of State

Current Principal Place of Business:

2500 MAITLAND CENTER PARKWAY
SUITE 311B
MAITLAND, FL 32751

New Principal Place of Business:

Current Mailing Address:

2500 MAITLAND CENTER PARKWAY
SUITE 311B
MAITLAND, FL 32751

New Mailing Address:

FEI Number: 26-3397998

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NANCY, SMITH RA
2611 TECHNOLOGY DRIVE
SUITE 220
ORLANDO, FL 32804 US

Name and Address of New Registered Agent:

NANCY, SMITH RA
2500 MAITLAND CENTER PARKWAY
STE 311B
MAITLAND, FL 32751 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: NANCY SMITH

03/13/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PINNACLE REO SERVICES, LLC
Address: 2611 TECHNOLOGY DRIVE, STE 220
City-St-Zip: ORLANDO, FL 32804

Title: MGR () Delete
Name: ORSOLITS, ROBERT
Address: 195 LAKEWOOD CIR.
City-St-Zip: MAITLAND, FL

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: PINNACLE REO SERVICES, LLC
Address: 2500 MAITLAND CENTER PARKWAY, SUITE 311B
City-St-Zip: MAITLAND, FL 32751

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: PINNACLE REO SERVICES

MGRM

03/13/2009

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