2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 28, 2009
Secretary of State

DOCUMENT# L08000108473

Entity Name: TREASURE COAST HOME REPAIR & IMPROVEMENT, LLC

Current Principal Place of Business:

2342 NE TROPICAL WAY
JENSEN BEACH, FL 34957 US

New Principal Place of Business:

Current Mailing Address:

2342 NE TROPICAL WAY
JENSEN BEACH, FL 34957 US

New Mailing Address:

FEI Number: 26-3768438 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILSON, DONALD D JR.
6705 RED RD.
608
CORAL GABLES, FL 33143 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: WILSON, EDWIN I
Address: 2342 NE TROPICAL WAY
City-St-Zip: JENSEN BEACH, FL 34957

Title: MGRM ( ) Delete
Name: CROWLEY, STEVEN
Address: 2342 NE TROPICAL WAY
City-St-Zip: JENSEN BEACH, FL 34957

ADDITIONS/CHANGES:

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

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: EDWIN I. WILSON MGRM 02/28/2009

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