

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000003814

Entity Name: TGHOMESOFT, LLC

FILED
Feb 04, 2006
Secretary of State

Current Principal Place of Business:

4325 FOUNTAINVIEW LANE #5307
ORLANDO, FL 328085700

New Principal Place of Business:

4521 ROSS LANIER LANE
KISSIMMEE, FL 34758

Current Mailing Address:

4325 FOUNTAINVIEW LANE #5307
ORLANDO, FL 328085700

New Mailing Address:

4521 ROSS LANIER LANE
KISSIMMEE, FL 34758

FEI Number: 20-0414215

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GENTILE, JEAN-LAURENT
4521 ROSS LANIER LANE
KISSIMMEE, FL 34758 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: MGR () Delete
Name: GENTILE, JEAN LAURENT
Address: 4325 FOUNTAINVIEW LANE #5307
City-St-Zip: ORLANDO, FL 328085700

Title: MGR () Delete
Name: GENTILE, KATHARINE E
Address: 4325 FOUNTAINVIEW LANE #5307
City-St-Zip: ORLANDO, FL 328085700

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: GENTILE, JEAN LAURENT
Address: 4521 ROSS LANIER LANE
City-St-Zip: KISSIMMEE, FL 34758

Title: MGR (X) Change () Addition
Name: GENTILE, KATHARINE E
Address: 4521 ROSS LANIER LANE
City-St-Zip: KISSIMMEE, FL 34758

I hereby certify that the information supplied with this filing does not qualify for the 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-LAURENT GENTILE

MGR

02/04/2006

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