2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 02, 2009
Secretary of State

DOCUMENT# M08000001616

Entity Name: JBL HOME INSPECTION LLC

Current Principal Place of Business:

1394 DUNLAWTON AVENUE #705
PORT ORANGE, FL 32127

New Principal Place of Business:

1200 FLORAL SPRINGS BLVD
3-107
PORT ORANGE, FL 32129

Current Mailing Address:

1394 DUNLAWTON AVENUE #705
PORT ORANGE, FL 32127

New Mailing Address:

1200 FLORAL SPRINGS BLVD
3-107
PORT ORANGE, FL 32129

FEI Number: 26-2029862 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

LAPERCHIA, JOSEPH B
1394 DUNLAWTON AVENUE #705
PORT ORANGE, FL 32127 US

Name and Address of New Registered Agent:

LAPERCHIA, JOSEPH B
1200 FLORAL SPRINGS BLVD
3-107
PORT ORANGE, FL 32129 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: _____ 05/02/2009
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: LAPERCHIA, JOSEPH B
Address: 1394 DUNLAWTON AVENUE #705
City-St-Zip: PORT ORANGE, FL 32127

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: LAPERCHIA, JOSEPH B
Address: 1200 FLORAL SPRINGS BLVD #3-107
City-St-Zip: PORT ORANGE, FL 32129

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: JOSEPH B LAPERCHIA MGR 05/02/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date