

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000093220

FILED
Feb 05, 2008
Secretary of State

Entity Name: SHADOWOOD VILLAS, LLC

Current Principal Place of Business:

1130 N.E. 4TH STREET
OCALA, FL 34470

New Principal Place of Business:

Current Mailing Address:

1130 N.E. 4TH STREET
OCALA, FL 34470

New Mailing Address:

FEI Number: 20-5591073

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REILLY, LISA
1130 N.E. 4TH STREET
OCALA, FL 34470 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: REILLY, LISA
Address: 1130 N.E. 4TH STREET
City-St-Zip: Ocala, FL 34470

ADDITIONS/CHANGES:

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: LISA REILLY

RA

02/05/2008

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