

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000045777

Entity Name: TERRAGLIO HOMES, LLC

FILED
Apr 16, 2009
Secretary of State

Current Principal Place of Business:

625 N. CENTRAL
OVIEDO, FL 32765

New Principal Place of Business:

Current Mailing Address:

625 N. CENTRAL AVENUE
OVIEDO, FL 32765

New Mailing Address:

FEI Number: 68-0579291

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TERRAGLIO, JOANNIE S
625 N. CENTRAL AVENUE
OVIEDO, FL 32765 US

Name and Address of New Registered Agent:

ANDERSEN, KOREY D
625 N. CENTRAL AVENUE
OVIEDO, FL 32765 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: KOREY ANDERSEN

04/16/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: TERRAGLIO, PATRICK
Address: 625 N. CENTRAL AVENUE
City-St-Zip: OVIEDO, FL 32765 US

Title: MGRM () Delete
Name: TERRAGLIO, JOANNIE S
Address: 625 N. CENTRAL AVENUE
City-St-Zip: OVIEDO, FL 32765 US

Title: MGRM () Delete
Name: ANDERSEN, KOREY D
Address: 625 N. CENTRAL AVENUE
City-St-Zip: OVIEDO, FL 32765

ADDITIONS/CHANGES:

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

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: KOREY ANDERSEN

MGRM

04/16/2009

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