

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000055394

FILED
Apr 30, 2008
Secretary of State

Entity Name: ROBINSON CUSTOM HOMES, LLC

Current Principal Place of Business:

8507 FOREST CITY RD
ORLANDO, FL 32810 US

New Principal Place of Business:

Current Mailing Address:

4359 LAKE RICHMOND DR
ORLANDO, FL 32811 US

New Mailing Address:

369 KILLINGTON WAY
ORLANDO, FL 32835 US

FEI Number: 20-0513896

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, JOHNNY
4359 LAKE RICHMOND DR
ORLANDO, FL 32811 US

Name and Address of New Registered Agent:

ROBINSON, JOHNNY
369 KILLINGTON WAY
ORLANDO, FL 32835 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: JOHNNY ROBINSON

04/30/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ROBINSON, JOHNNY
Address: 4359 LAKE RICHMOND DR
City-St-Zip: ORLANDO, FL 32811 US

Title: MGR () Delete
Name: ROBINSON, MARGARET E
Address: 4359 LAKE RICHMOND DR.
City-St-Zip: ORLANDO, FL 32811 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ROBINSON, JOHNNY
Address: 369 KILLINGTON WAY
City-St-Zip: ORLANDO, FL 32835 US

Title: MGR (X) Change () Addition
Name: ROBINSON, MARGARET E
Address: 369 KILLINGTON WAY
City-St-Zip: ORLANDO, FL 32835 US

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: JOHNNY ROBINSON

M

04/30/2008

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