

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

Jan 07, 2008 08:00 AM
Secretary of State

DOCUMENT # L04000011617

1. Entity Name
SIGNATURE HOMES, LLC



Principal Place of Business
9389 HAMMAN AVENUE
PENSACOLA, FL 32514 US

Mailing Address
755 GRAND BLVD.
SUITE B105-344
DESTIN, FL 32550 US



01042008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0895890

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

WILLIAMS, MONTE R
9389 HAMMAN AVENUE
PENSACOLA, FL 32514

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

U000000775792
01/08/08-80043-019 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
WILLIAMS, MONTE R
9389 HAMMAN AVENUE
PENSACOLA, FL 32514

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
WILLIAMS, DONNA K
9389 HAMMAN AVENUE
PENSACOLA, FL 32514

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

12-31-07 850-572-0083