

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000011617

Entity Name: SIGNATURE HOMES, LLC

FILED
Feb 22, 2009
Secretary of State

Current Principal Place of Business:

9389 HAMMAN AVENUE
PENSACOLA, FL 32514 US

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

1765 E. NINE MILE RD.
STE. 1-109
PENSACOLA, FL 32514 US

FEI Number: 20-0895890

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WILLIAMS, MONTE R
9389 HAMMAN AVENUE
PENSACOLA, FL 32514 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: MGRM () Delete
Name: WILLIAMS, MONTE R
Address: 9389 HAMMAN AVENUE
City-St-Zip: PENSACOLA, FL 32514 US

Title: MGR (X) Delete
Name: WILLIAMS, DONNA K
Address: 9389 HAMMAN AVENUE
City-St-Zip: PENSACOLA, FL 32514 US

ADDITIONS/CHANGES:

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: MONTE R. WILLIAMS

MGRM

02/22/2009

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