


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 01, 2008 8:00 am
Secretary of State

04-01-2008 90065 008 ***138.75

DOCUMENT # L04000020579 1. Entity Name THE VILLAS, LLC	
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Principal Place of Business 1700 SE 17TH STREET, STE. 300 OCALA, FL 34471 1720 SE 16th Ave, #200	Mailing Address 1700 SE 17TH STREET, STE. 300 OCALA, FL 34471 1720 SE 16th Ave, #200
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02082008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 77-0631213	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent

YOUNG, LARRY E 1720 SE 16TH AVE BLDG 200 OCALA, FL 34471

**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 *Roy Thad Boyd III* *2-18-08*
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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM <i>ROY</i> BOYD, RAY T III 1720 SE 16TH AVE BLDG 200 OCALA, FL 34471
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**DO NOT WRITE
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: *Roy Thad Boyd III* *2-18-08* *352-861-2248*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #