

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L04000036324

FILED
May 15, 2008
Secretary of State**Entity Name:** MOSLEY HOMES LLC**Current Principal Place of Business:**8236 W JAMESTOWN CIRCLE
FORT MYERS, FL 33917**New Principal Place of Business:**8236 W JAMESTOWN CIRCLE
N. FORT MYERS, FL 33917**Current Mailing Address:**8236 W JAMESTOWN CIRCLE
FORT MYERS, FL 33917**New Mailing Address:**8236 W JAMESTOWN CIRCLE
N. FORT MYERS, FL 33917**FEI Number:** 73-1712947**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MOSLEY, TRACEY R II
8236 W JAMESTOWN CIRCLE
FORT MYERS, FL 33917 US**Name and Address of New Registered Agent:**MOSLEY, TRACEY R II
8236 W JAMESTOWN CIRCLE
N. FORT MYERS, FL 33917 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:

05/15/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:**Title:** MGRM () Delete
Name: MOSLEY, TRACEY R II
Address: 8236 W JAMESTOWN CIRCLE
City-St-Zip: FORT MYERS, FL 33917**Title:** () Delete
Name:
Address:
City-St-Zip:**Title:** () Delete
Name:
Address:
City-St-Zip:**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES:****Title:** MGRM (X) Change () Addition
Name: MOSLEY, TRACEY R II
Address: 8236 W JAMESTOWN CIRCLE
City-St-Zip: N. FORT MYERS, FL 33917**Title:** MGRM () Change (X) Addition
Name: GRANT, MATTHEW D II
Address: 8236 W. JAMESTOWN CIR
City-St-Zip: N. FORT MYERS, FL 33917**Title:** MGRM () Change (X) Addition
Name: MOSLEY, BRANDON
Address: 8236 W. JAMESTOWN CIR
City-St-Zip: N. FORT MYERS, FL 33917**Title:** MGRM () Change (X) Addition
Name: MOSLEY, TRACEY L III
Address: 8236 W. JAMESTOWN CIR
City-St-Zip: N. FT MYERS, FL 33917

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: TRACEY R MOSLEY, II

PRES

05/15/2008

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