2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000062750

City-St-Zip:

GAINESVILLE, FL 32607

Entity Name: GRANADA OF GAINESVILLE, LLC

FILED Jan 14, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1800 NW 4TH ST GAINESVILLE, FL 32609 **Current Mailing Address: New Mailing Address:** P.O. BOX 13121 GAINESVILLE, FL 32604 FEI Number: 20-1550137 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: INCORPORATE USA, INC. 3150 SANDY RIDGE DR CLEARWATER, FL 33761 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete HASSE, JEFF P Name: Name: P.O. BOX 13121 Address: Address: City-St-Zip: GAINESVILLE, FL 32604 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: SANTILLI, THOMAS C Name: Address: P.O. BOX 12747 Address: City-St-Zip: GAINESVILLE, FL 32604 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition SANTILLI, TOMMIE L Name: Name: Address: P.O. BOX 13121 Address: City-St-Zip: GAINESVILLE, FL 32604 City-St-Zip: MGRM () Delete DAUGHERTY, RALPH Title: Title: () Change () Addition Name: Name: Address: 3028 NW 2ND AVE Address: City-St-Zip: GAINESVILLE, FL 32607 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition DAUGHERTY, DEBBIE Name: Name: 3028 NW 2ND AVE Address: Address:

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.

City-St-Zip:

SIGNATURE: JEFFREY P. HASSE MGRM 01/14/2008