2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 28, 2008
Secretary of State

DOCUMENT# L04000094372

Entity Name: TOWER HILL PROFESSIONAL SUITES, LLC

Current Principal Place of Business:

250-B NW 76TH DRIVE
GAINESVILLE, FL 32607

New Principal Place of Business:

250-B NW 76TH DRIVE
GAINESVILLE, FL 326076635 US

Current Mailing Address:

250-B NW 76TH DRIVE
GAINESVILLE, FL 32607

New Mailing Address:

250-B NW 76TH DRIVE
GAINESVILLE, FL 326076635 US

FEI Number: 80-0135133 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WINNIE, JOHN S
3520 NW 43RD STREET
GAINESVILLE, FL 32606 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: SHAMIS, JEFF D
Address: 250-B NW 76TH DRIVE
City-St-Zip: GAINESVILLE, FL 32607

Title: MGRM ( ) Delete
Name: SHAMIS, DIANA J
Address: 8224 SW 103 AV
City-St-Zip: GAINESVILLE, FL 32608

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: SHAMIS, JEFF D
Address: 250-B NW 76TH DRIVE
City-St-Zip: GAINESVILLE, FL 326076635 US

Title: MGRM (X) Change ( ) Addition
Name: SHAMIS, DIANA J
Address: 8224 SW 103 AV
City-St-Zip: GAINESVILLE, FL 32608 US

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: JEFF D SHAMIS MGRM 01/28/2008

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