

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000033388

FILED
May 15, 2008
Secretary of State

Entity Name: SIGNATURE BUILDING INSPECTIONS LLC

Current Principal Place of Business:

11581 SW 84TH AVE. RD.
OCALA, FL 34481 US

New Principal Place of Business:

6422 SW 145TH LANE
OCALA, FL 34473 US

Current Mailing Address:

11581 SW 84TH AVE. RD.
OCALA, FL 34481 US

New Mailing Address:

6422 SW 145TH LANE
OCALA, FL 34473 US

FEI Number: 20-2631935

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASTRO, VIRGINIA
11581 SW 84 AVENUE ROAD
OCALA, FL 34481 US

Name and Address of New Registered Agent:

CASTRO, VIRGINIA
6422 SW 145TH LANE
OCALA, FL 34473 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: CASTRO, RONALD J
Address: 11581 SW 84 AVENUE ROAD
City-St-Zip: Ocala, FL 34481 US

Title: MGRM () Delete
Name: CASTRO, VIRGINIA
Address: 11581 SW 84 AVENUE ROAD
City-St-Zip: Ocala, FL 34481 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CASTRO, RONALD J
Address: 6422 SW 145TH LANE
City-St-Zip: Ocala, FL 34473 US

Title: MGRM (X) Change () Addition
Name: CASTRO, VIRGINIA
Address: 6422 SW 145TH LANE
City-St-Zip: Ocala, FL 34473 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: VIRGINIA CASTRO

MGMR

05/15/2008

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