

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000070163

FILED
May 08, 2008
Secretary of State

Entity Name: FOX POINTE PROPERTIES DESIGN BUILDERS, LLC

Current Principal Place of Business:

5745 SOUTHWEST 43RD STREET ROAD
OCALA, FL 34474

New Principal Place of Business:

7355 SW 38TH ST SUITE 106
OCALA, FL 34474

Current Mailing Address:

5745 SOUTHWEST 43RD STREET ROAD
OCALA, FL 34474

New Mailing Address:

7355 SW 38TH ST. SUITE 106
OCALA, FL 34474

FEI Number: 16-1728861 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

MACKAY, DAVID L
2801 SOUTHWEST COLLEGE ROAD, SUITE 9
OCALA, FL 34474 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: MEMB () Delete
Name: LAWROSKI, MARY K
Address: 5745 S.W. 43RD ST RD
City-St-Zip: Ocala, FL 34474

ADDITIONS/CHANGES:

Title: MEMB (X) Change () Addition
Name: LAWROSKI, MARY K
Address: 7355 SW 38TH ST.
City-St-Zip: Ocala, FL 34474

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: MARY K. LAWROSKI

MEMB

05/08/2008

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