

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 21, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # L05000120878**

1. Entity Name  
TRADITIONAL HOMES OF ALACHUA, LLC



Principal Place of Business

3024 NE 21 ST WAY  
GAINESVILLE, FL 32609

Mailing Address

3024 NE 21 ST WAY  
GAINESVILLE, FL 32609



01252008 No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
56-2543578

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

BRYANT, WAYNE C  
3024 NE 21ST WAY  
GAINESVILLE, FL 32609

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Linda H. Bryant*

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

3/13/08  
DATE

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

U00000913078  
05/08/08-80001-020 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	BRYANT, WAYNE C
STREET ADDRESS	3024 NE 21ST WAY
CITY-ST- ZIP	GAINESVILLE, FL 32609
TITLE	MGRM
NAME	BRYANT, LINDA H
STREET ADDRESS	3024 NE 21ST WAY
CITY-ST- ZIP	GAINESVILLE, FL 32609
TITLE	
NAME	
STREET ADDRESS	
CITY-ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST- ZIP	

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:**

*Wayne C Bryant*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3/13/08  
Date

352-378-2857  
Daytime Phone #