2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

05-19-2008 90186 023 ***138.50
FILED L06000033766
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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DOCUMENT # L06000033766

1. Entity Name
TTS HOMES, LLC

Principal Place of Business	Mailing Address
751 OAK STREET, SUITE 600 JACKSONVILLE, FL 32204	751 OAK STREET, SUITE 600 JACKSONVILLE, FL 32204

04282008No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-4603815
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

R. LAMAR, SHAW JR.
751 OAK STREET, SUITE 600
JACKSONVILLE, FL 32204

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	SHAW, R. LAMAR JR.
STREET ADDRESS	751 OAK STREET, SUITE 600
CITY-ST-ZIP	JACKSONVILLE, FL 32204
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
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CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

B. Tisdock JUN 02 2008

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: R. Ly 4-28-08 9043580500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #