2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000045543 **FILED** Jul 11, 2008 08:00 AM SIGNATURE PROPERTIES, L.L.C. **Secretary of State** Principal Place of Business Mailing Address 218 NORTH FLORIDA STREET 218 NORTH FLORIDA STREET SUITE 2 SUITE 2 BUSHNELL, FL 33513 US BUSHNELL, FL 33513 US 06022008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-5468831 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ORNSTEIN, MARK L DO NOT WRITE 2 SOUTH ORANGE AVENUE **5TH FLOOR** IN THIS SPACE ORLANDO, FL 32801 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 Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$538.75 U00000954401 07/I1/08-80011-014 538.75 Due by September 12, 2008 MANAGING MEMBERS/MANAGERS 9. TITLE MGR SANCHEZ, ROBERT A NAME 218 NORTH FLORIDA STREET, SUITE 2 STREET ADDRESS CITY-ST-ZIP BUSHNELL, FL 33513 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE

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:

NAME STREET ADDRESS

ED OR PRINTED AME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

7-5-08 357-568-7701