

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000089079

FILED  
Feb 14, 2008  
Secretary of State

Entity Name: SIGNATURE, LLC

**Current Principal Place of Business:**

231 LAKEVIEW DRIVE  
ANNA MARIA, FL 34216 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 614  
ANNA MARIA, FL 34216 US

**New Mailing Address:**

FEI Number: 20-5520954

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LAPENSEE, J. KAREN  
5362 GULF DR.  
HOLMES BEACH, FL 34217 US

**Name and Address of New Registered Agent:**

LAPENSEE, J. KAREN  
401 MANATEE AVE.  
HOLMES BEACH, FL 34217 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: J. KAREN LAPENSEE

02/14/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: LAPENSEE, JAMES M  
Address: 231 LAKEVIEW DRIVE  
City-St-Zip: ANNA MARIA, FL 34216 US

Title: MGRM ( ) Delete  
Name: LAPENSEE, J. KAREN  
Address: 231 LAKEVIEW DRIVE  
City-St-Zip: ANNA MARIA, FL 34216 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: J. KAREN LAPENSEE

MGRM

02/14/2008

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