

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000102775

Entity Name: GRIFBAKE VILLAGES, LLC

FILED
Jan 11, 2008
Secretary of State

Current Principal Place of Business:

1606 MT. CROGHAN TRAIL
THE VILLAGES, FL 32162

New Principal Place of Business:

990 ALVEREZ AVE
THE VILLAGES, FL 32159

Current Mailing Address:

1606 MT. CROGHAN TRAIL
THE VILLAGES, FL 32162

New Mailing Address:

990 ALVEREZ AVE
THE VILLAGES, FL 32159

FEI Number: 26-1215431

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE MILLHORN LAW FIRM LLC
13710 US HIGHWAY 441
SUITE 100
THE VILLAGES, FL 32159 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: MGRM () Delete
Name: GRIFFIN, AUSTIN
Address: 1606 MT. CROGHAN TRAIL
City-St-Zip: THE VILLAGES, FL 32162

Title: MGRM () Delete
Name: BAKER, JILL
Address: 9732 BAKER'S MILL COURT
City-St-Zip: LEO, ID 46765

Title: MGRM () Delete
Name: GRIFFIN, KIMBERLYN
Address: 1606 MT. CROGHAN TRAIL
City-St-Zip: THE VILLAGES, FL 32162

Title: MGRM () Delete
Name: BAKER, MICHAEL
Address: 9732 BAKER'S MILL COURT
City-St-Zip: LEO, ID 46765

ADDITIONS/CHANGES:

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

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

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: AUSTIN GRIFFIN

MGRM

01/11/2008

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