

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000117127

**FILED**  
**Apr 09, 2012**  
**Secretary of State**

**Entity Name:** VILLA REVA TIMBERLINE, LLC

**Current Principal Place of Business:**

2970 ST. JOHNS AVENUE  
SUITE 9E  
JACKSONVILLE, FL 32205 US

**New Principal Place of Business:**

**Current Mailing Address:**

2970 ST. JOHNS AVENUE  
SUITE 9E  
JACKSONVILLE, FL 32205 US

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

MONTGOMERY, CYNTHIA M  
50 NORTH LAURA STREET  
SUITE 1100  
JACKSONVILLE, FL 32202 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:** MGR  
**Name:** VILLA REVA MANAGEMENT, LLC  
**Address:** 2970 ST. JOHNS AVENUE, SUITE 9E  
**City-St-Zip:** JACKSONVILLE, FL 32205 US

I hereby 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: VILLA REVA MANAGEMENT, LLC

MGR

04/09/2012

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