

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 23, 2008 8:00 am Secretary of State 04-23-2008 90122 021 ***138.75

Pinnegas Place of Business 3751 WICTORD ARRIX ME TORONTO CMTABIO CARRADA MIN 324, XX CRANICA	DOCUMENT # M0200000206 1. Entity Name ASHTON WOODS USA L.L.C.													
Suite, Apt. 4, etc. Suite, Apt. 4, etc. O2212008 Chg-LLC CR25083 (12/05) City & State City & State A. FEN. Name: Applied For T-5-2/72 (1881) Applied For T-5-2/72 (1881	3751 VICTOR TORONTO ON CANADA M1W	ORIA PARK AVE Ontario 1 w 3z4,)	XX											
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The above named entity submits this statement for the purpose of changing its registered office or negligered agent, or both, in the State of Florida. I am lennilar with, and accept, the designation of registered agent. Signed Address of New Registered Agent TALLAHASSEE, FL 32301 Street Address of New Registered Agent Capy FL Zo Code 8. The above named entity submits this statement for the purpose of changing its registered office or negligered agent, or both, in the State of Florida. I am lennilar with, and accept, the designation of registered agent. SIGNATURE: Street Address of New Registered Agent Capy FL Zo Code 8. The above named entity submits this statement for the purpose of changing its registered office or negligered agent, or both, in the State of Florida. I am lennilar with, and accept, the designation of registered agent. SIGNATURE: Street Address of New Registered Agent Capy FL Zo Code 8. The above named entity submits this statement for the purpose of changing its registered office or negligered agent, or both, in the State of Florida. I am lennilar with, and accept, the designation of registered agent. SIGNATURE: Street Address of New Registered Agent And The State of Florida. I am lennilar with, and accept, the designation of registered agent. DATE The above named entity submits this statement for the purpose of changing its registered office or negligered agent, or both, in the State of Florida. I am lennilar with end accept, the designation of the state of Florida. I am lennilar with end accept, the designation of the purpose of retard agent. DATE The Landah And The State of Florida. I am lennilar with end accept, the state of Florida. I am lennilar with end accept, the state of Florida. I am lennilar with end accept, the state of Florida. I am lennilar with end accept, the state of Florida. I am lennilar with end accept, the state of Florida. I am lennilar with end accept, the state of Florida. I am lennilar with end accept, the state of Florida. I am lennilar with en														
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CORPDIRECT AGENTS, INC. 516 EAST PARK AVENUE TALLAHASSEE, FL 32301 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 ternitian with, and accept, the obligations of registered agent age	Zip		Country	Zip	Cou	ıntry		5. Certificate	of Status Desire	d 🗆	\$5.00 Add Fee Require	litional d		
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