

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000082490

**FILED**  
**Apr 30, 2007**  
**Secretary of State**

**Entity Name:** ORLANDO FAMILY REAL ESTATE VENTURES, LLC

**Current Principal Place of Business:**

342 FOX HILL DRIVE  
DEBARY, FL 32713 US

**New Principal Place of Business:**

2578 ENTERPRISE RD.  
SUITE 247  
ORANGE CITY, FL 32763 US

**Current Mailing Address:**

342 FOX HILL DRIVE  
DEBARY, FL 32713 US

**New Mailing Address:**

2578 ENTERPRISE RD.  
SUITE 247  
ORANGE CITY, FL 32763 US

FEI Number: 20-4655447

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ORLANDO, VINCENT R  
342 FOX HILL DRIVE  
DEBARY, FL 32713 US

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

SMALL BUSINESS RESOURCES USA, INC.  
773 S. KIRKMAN RD.  
SUITE 118  
ORLANDO, FL 32811 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: JAMES K. DUERR, CPA

04/30/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: ORLANDO, VINCENT R  
Address: 342 FOX HILL DRIVE  
City-St-Zip: DEBARY, FL 32713 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: ORLANDO, VINCENT R  
Address: 2578 ENTERPRISE RD.  
City-St-Zip: ORANGE CITY, FL 32763 US

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: VINCENT R. ORLANDO

MGR

04/30/2007

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