

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000082848

FILED
Apr 27, 2009
Secretary of State

Entity Name: STRATEGIC RESULTS REAL ESTATE SERVICES, LLC.

Current Principal Place of Business:

1208 E. KENNEDY BLVD. #1120
TAMPA, FL 33602 US

New Principal Place of Business:

9000 COMMODORE DRIVE, #602
SEMINOLE, FL 33776 US

Current Mailing Address:

1208 E. KENNEDY BLVD. #1120
TAMPA, FL 33602 US

New Mailing Address:

9000 COMMODORE DRIVE, #602
SEMINOLE, FL 33776 US

FEI Number: 20-5413553

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCODIUS, CHRISTOPHER S
10318 TARRAGON DR.
RIVERVIEW, FL 33569 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: YAEGER, SUZANNE
Address: 1314 BROOK FOREST DRIVE
City-St-Zip: ATLANTA, GA 30324 US

Title: MGRM () Delete
Name: SCODIUS, CHRISTOPHER S
Address: 1120 E. KENNEDY BLVD. #1120
City-St-Zip: TAMPA, FL 33602 US

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: SCODIUS, CHRISTOPHER S
Address: 9000 COMMODORE DRIVE, #602
City-St-Zip: SEMINOLE, FL 33776 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: CHRISTOPHER S. SCODIUS

MGRM

04/27/2009

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