

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000083645

FILED  
May 05, 2009  
Secretary of State

**Entity Name:** MONITOR REAL ESTATE MANAGEMENT, LLC

**Current Principal Place of Business:**

311 SW 2ND AVE  
APT 1  
DELRAY BEACH, FL 33444

**New Principal Place of Business:**

701 SE 6TH AVE  
SUITE 202  
DELRAY BEACH, FL 33483

**Current Mailing Address:**

PO BOX 2188  
STUART, FL 34995

**New Mailing Address:**

701 SE 6TH AVE  
SUITE 202  
DELRAY BEACH, FL 33483

FEI Number: 26-1171807      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

PETRI, JOSEPH  
1780 PALM COVE BLVD., #304  
DELRAY BEACH, FL 33445 US

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

PETRI, JOSEPH  
701 SE 6TH AVE  
SUITE 202  
DELRAY BEACH, FL 33483 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:

05/05/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: PETRI, JOSEPH  
Address: 1780 PALM COVE BLVD., #304  
City-St-Zip: DELRAY BEACH, FL 33445

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: PETRI, JOSEPH  
Address: 701 SE 6TH AVE SUITE 202  
City-St-Zip: DELRAY BEACH, FL 33483

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: JOSEPH PETRI

MGRM

05/05/2009

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