


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 08, 2006 08:00 AM
Secretary of State

DOCUMENT # L93000000327

1. Entity Name
SVO REALTY, L.C.



Principal Place of Business 9090 ADAMO DRIVE TAMPA, FL 33619	Mailing Address 2120 WILSHIRE BLVD., #400 SANTA MONICA, CA 90403
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DO NOT WRITE IN THIS SPACE



08012006No Chg-LLC CR2E083 (11/05)

4. FEI Number 95-4470454	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**SCHLOSSER, RICHARD A
 500 EAST KENNEDY BLVD.
 SUITE 200
 TAMPA, FL 33602-4825**

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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 familiar with, and accept the obligations of registered agent

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
 Due by September 6, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BREECH, ANDREW L 2120 WILSHIRE BLVD., SUITE 400 SANTA MONICA, CA 90403
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR OLLIGES, ED 660 DECATUR BLVD. LAS VEGAS, NV 89107
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM NATIONAL FACILITIES CORP. 2120 WILSHIRE BLVD., SUITE 400 SANTA MONICA, CA 90403
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEM BREECH, ANDREW L 2120 WILSHIRE BLVD., SUITE 400 SANTA MONICA, CA 90403
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEM OLLIGES, ED 660 DECATUR BLVD. LAS VEGAS, NV 89107
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000573852
 08/08/06-80005-007 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: *Andrew L Breech* **Treasurer**
National Facilities Corp. 8/3/06 310-828-4748

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #