

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L93000000327

**FILED**  
**Mar 30, 2010**  
**Secretary of State**

**Entity Name:** SVO REALTY, L.C.

**Current Principal Place of Business:**

9090 ADAMO DRIVE  
TAMPA, FL 33619

**New Principal Place of Business:**

**Current Mailing Address:**

2120 WILSHIRE BLVD., #400  
SANTA MONICA, CA 90403

**New Mailing Address:**

**FEI Number:** 95-4470454

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SCHLOSSER, RICHARD A  
500 EAST KENNEDY BLVD.  
SUITE 200  
TAMPA, FL 336024825 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: MGR  
Name: BREECH, ANDREW L  
Address: 2120 WILSHIRE BLVD., SUITE 400  
City-St-Zip: SANTA MONICA, CA 90403

Title: MGR  
Name: OLLIGES, ED  
Address: 660 DECATUR BLVD.  
City-St-Zip: LAS VEGAS, NV 89107

Title: MGRM  
Name: NATIONAL FACILITIES CORP.  
Address: 2120 WILSHIRE BLVD., SUITE 400  
City-St-Zip: SANTA MONICA, CA 90403

Title: MGR  
Name: BREECH, ANDREW L  
Address: 2120 WILSHIRE BLVD., SUITE 400  
City-St-Zip: SANTA MONICA, CA 90403

Title: MGR  
Name: OLLIGES, ED  
Address: 660 DECATUR BLVD.  
City-St-Zip: LAS VEGAS, NV 89107

I hereby 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: ANDREW L. BREECH

MGR

03/30/2010

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