### 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

### **DOCUMENT # L98000000595**

1. Entity Name

EASTSIDE REALTY COMPANY, L.L.C.



FILED Apr 19, 2007 08:00 AM Secretary of State

Principal Place of Business

161 BAHAMA AVENUE KEY LARGO, FL 33037 Mailing Address

161 BAHAMA AVENUE KEY LARGO, FL 33037



04172007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 65-0847428

Applied For Not Applicable

5. Certificate of Status Desired



\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

KATZENELL, HERMAN 161 BAHAMA AVENUE KEY LARGO, FL 33037

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| <ol><li>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<br/>the obligations of registered agent.</li></ol> |   |  |  |
|--|---|--|--|
| SIGNAT   | URE   | (NOTE: Registered Agent signature required when reinstating) | DATE                                     |
|  | Filing Fee is \$50.00<br>Due by May 1, 2007 |  | U00000719020<br>05/01/07-80046-011 55.00 |
| 9.   | MANAGING MEMBERS/MANAGERS                   | · · · · · · · · · · · · · · · · · · ·                        |  |

#### MGR TITLE NAME KATZENELL, HERMAN 161 BAHAMA AVENUE STREET ADDRESS CITY-ST-ZIP KEY LARGO, FL 33037 TITLE MGR NAME KATZENELL, MARION STREET ADDRESS 161 BAHAMA AVENUE CITY-ST-ZIP KEY LARGO, FL 33037 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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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 employeed to execute this report as required by Chapter 608. Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/2/07 (305) 457-2869