# I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.

### SIGNATURE: THERESA KNOWER

City-State-Zip: FORT MYERS FL 33919

Electronic Signature of Signing Authorized Person(s) Detail

MANAGER

Date

Authorized Person(s) Detail :			
Title	MGRM	Title	MGR
Name	ISLAND FINANCIAL SERVICES, INC.	Name	OWENS, DAVID A
Address	1520 ROYAL PALM SQ. BLVD. SUITE 320	Address	1520 ROYAL PALM SQ. BLVD SUITE 320
City-State-Zip:	FORT MYERS FL 33919	City-State-Zip:	FORT MYERS FL 33919
Title	MGR		
Name	KNOWER, THERESA		
Address	1520 ROYAL PALM SQ. BLVD. SUITE 320		

# FEI Number: NOT APPLICABLE

# Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

ISLAND FINANCIAL SERVICES, INC 1520 ROYAL PALM SQ. BLVD. 320 FORT MYERS, FL 33919 US

SIGNATURE:

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.

# 2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

# DOCUMENT# L0100005580

Entity Name: 1031 REVERSE EXCHANGE COMPANY LLC

# **Current Principal Place of Business:**

1520 ROYAL PALM SQ. BLVD. #320 FORT MYERS, FL 33919

## **Current Mailing Address:**

1520 ROYAL PALM SQ. BLVD. #320 FORT MYERS, FL 33919

# FILED Mar 21, 2013 Secretary of State CC8954116596

Certificate of Status Desired: No