2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

····	AIVI	ENDED AN	,									
DOCUMENT # 826072 1. Entity Name AVATAR REALTY INC.								FILED 08 DEC 22 AM 9: 30				
						180		1	של מבני ביב	eraTE		
Principal Plac	e of Business		Mailing	Address					SECRETARY TALLAHASSE	OF STATE		
Principal Place of Business Mailing Address 201 ALHAMBRA CIRCLE 201 ALHAMBRA CIRCLE								7	ALLAHASSE	F. F. China		
12TH FL			12TH FL			'						
CORAL GABLES, FL 33134-5102 CORAL GABLES, FL 3313					34-51	34-5102		1 (2010) 3 1 1	E IERIA GIIRI ANNI INDRA IER	I PIRIL RIBIO ALBIE BIRIL ALBIE BII	I 6 1 1 1 1 1 1 1	
2. Principal P	lace of Busin	3. Mailing Address										
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					12162008	Chg-P	CR2E034 (12/06)			
City & Stat	е		City 8	City & State				4. FEI Numb 23-173		 - -	pplied For ot Applicable	
Zip Country			Zıp	Zip Count				5. Certificate of Status Desired \$8.75 Additional Fee Required			ditional	
	6. Name	Registered	Registered Agent			7. Name and Address of New Registered Agent						
KERRIOAN HIANDTA I						Name						
KERRIGAN, JUANITA I 201 ALHAMBRA CIRCLE 12TH FL							Street Address (P.O. Box Number is Not Acceptable)					
CORAL GABLES, FL 33134												
						City	FL Z _{1p} Code					
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.												
900139209639 127227080000004 **70 00												
SIGNATURE TEXT Signature, typical or printed harme of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE												
A Florida Company Comp												
9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees												
10. OFFICERS AND DIRECTORS 11.								ADDITIONS.	CHANGES TO OFF	ICERS AND DIRECTOR	S IN 11 -	
TITLE	D Delete							PD Change (7 Addition)				
NAME	FELS, JONATHAN					E	201	ALHAMBRA CIRCLE, 12FL				
STREET ADDRESS CITY-ST-ZIP	ISS 201 ALHAMBRA CIR, 12 FL CORAL GABLES, FL 33134					ET ADDRESS -ST-ZIP	cons	ELFER, GERALD. DI ALHAMBRA CIRCLE, 12FL XXAL GABLES, FL 33134				
TITLE	V Delete											
NAME	RAYMON		NAMI	E	ner	FICHER, PATRICIA KIMBALL Change Lipaddillon						
STREET ADDRESS CITY-ST-ZIP	ss 201 ALHAMBRA CIRCLE 12TH FL CORAL GABLES, FL 33134					et address -st-zip	COR	AL GABLES, FL 3318+				
TITLE	VT Deleie											
NAME	KOTLER, RANDY L					E	KOT	KOTLER, RANDY L. GCANGE Addition RALLAMBRA CIRCLE, 12 FL				
STREET ADDRESS CITY-ST-7IP	201 ALHAMBRA CIR, 12 FL CORAL GABLES, FL 33134					ET ADDRESS - ST-ZIP	COR	ORAL GABLES, FL 3313+				
TITLE	VS Delete						V	,		☐ Change	Addition	
NAME	KERRIGAN, JUANITA I.					[YUN	ES, HE	NRY CIE	CLE D.F.	_	
STREET ADDRESS CITY-ST-ZIP	201 ALHAMBRA CIRCLE 12TH FL CORAL GABLES, FL 33134					ET ADDRESS - ST - ZIP	201	NES, HENRY OI ACHAMBRA CIRCLE, 12 FL RM GABLES, FL 33134				
TITLE	VD	ABLES, FL 33134		☐ Defete	TITLE		AVE	o are	ites,	☐ Change	Addition	
NAME	LEVY, MICHAEL					E		I KADD	TIME	チュンドー		
STREET ADDRESS CITY-ST-ZIP	201 ALHAMBRA CIRCLE 12 TH FLOOR CORAL GABELS, FL 33134					ET ADDRESS - ST - ZIP	201	CAL GABLES, FL 33134				
TITLE	V	ABELS, FL 33134		☐ Delete	TITLE	·	ONE)		Change	Addition	
NAME	PASTLEY JEFREY A. ADDITION					F	WEL	DA, PRIC	chers t	,		
STREET ADDRESS CITY-ST-ZIP	201 AL		ET ADDRESS -ST-ZIP	201	VELDA, RICHARD P. 201 ALHAMBRA CURCLE, 1212 LORAL GABLES, EZ 33134							
12. Thereby o	cortify that the	information supplied with	フンリンデ n this filing d	toes not qualify for	the exe	emptions c	ontained	in Chapter 119	. Florida Statutos. I	further certify that the i	information	
12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath: that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.												
SIGNATURE: Junite J. Kengon JUANITA I. KERRIGAN 12/19/08 (305)442-7000 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR												

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