

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000002449

FILED
Jul 07, 2005
Secretary of State

Entity Name: WINWEL REALTY SERVICES LLC

Current Principal Place of Business:

355 EAGLE DRIVE
JUPITER, FL 33477

New Principal Place of Business:

6230 LESLIE STREET
JUPITER, FL 33458

Current Mailing Address:

355 EAGLE DRIVE
JUPITER, FL 33477

New Mailing Address:

6230 LESLIE STREET
JUPITER, FL 33458

FEI Number: 04-3692930 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

WINIKOFF, BENJAMIN
355 EAGLE DRIVE
JUPITER, FL 33477 US

Name and Address of New Registered Agent:

WELCER, DIANA L
6230 LESLIE STREET
JUPITER, FL 33458 US

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: DIANA L WELCER

07/07/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WINIKOFF, BENJAMIN
Address: 355 EAGLE DRIVE
City-St-Zip: JUPITER, FL 33477 US

Title: MGRM () Delete
Name: WELCER, DIANA
Address: 6230 LESLIE ST
City-St-Zip: JUPITER, FL 33458

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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: DIANA L WELCER

MGRM

07/07/2005

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