

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000005551

FILED
Apr 25, 2007
Secretary of State

Entity Name: CIMINELLI REAL ESTATE SERVICES OF FLORIDA, LLC

Current Principal Place of Business:

C/O CIMINELLI DEVELOPMENT CO., INC
350 ESSJAY ROAD
WILLIAMSVILLE, NY 14221

New Principal Place of Business:

Current Mailing Address:

C/O CIMINELLI DEVELOPMENT CO., INC.
350 ESSJAY ROAD
WILLIAMSVILLE, NY 14221

New Mailing Address:

FEI Number: 59-3670547

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAILIN, LAWRENCE J
401 EAST JACKSON STREET, SUITE 2200
TAMPA, FL 33602 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: MGRM () Delete
Name: CIMINELLI, FRANK L
Address: 630 ESSJAY ROAD - UNIT A
City-St-Zip: WILLIAMSVILLE, NY 14221

Title: MGR () Delete
Name: CIMINELLI, PAUL F
Address: 89 MAYNARD DR
City-St-Zip: EGGERTSVILLE, NY 14226

Title: MGR () Delete
Name: CIMINELLI, JOHN A
Address: 4994 STRICKLER ROAD
City-St-Zip: CLARENCE, NY 14031

Title: MGR (X) Delete
Name: STARK, WILLIAM B JR
Address: 59 THAMESFORD LANE
City-St-Zip: WILLIAMSVILLE, NY 14221

Title: MGR (X) Delete
Name: DENTINGER, JAMES F
Address: 10555 ROYAL OAK DRIVE
City-St-Zip: CLARENCE, NY 14031

Title: MGR (X) Delete
Name: KRAJACIC, FRED M
Address: 24 MELODY LANE
City-St-Zip: TONAWANDA, NY 14150

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CIMINELLI DEVELOPMENT, T COMPANY
Address: 350 ESSJAY ROAD, SUITE 101
City-St-Zip: WILLIAMSVILLE, NY 14221

Title: MGR (X) Change () Addition
Name: SWEARINGEN, JAMES H
Address: 10024 TATE LANE
City-St-Zip: TAMPA, FL 33626 US

Title: MGR (X) Change () Addition
Name: MCGEACHY, THOMAS
Address: 3004 W. HARBORVIEW AVENUE
City-St-Zip: TAMPA, FL 33611 US

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

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 exemption stated in Chapter 119, 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: J. HUNTER SWEARINGEN

MGR

04/25/2007

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