



# 2005 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
05 OCT -5 AM 8:14

DOCUMENT # L00000009810					
1. Entity Name RIVER ROAD REAL ESTATE, LLC					
Principal Place of Business 6950 BRYAN DAIRY ROAD LARGO, FL 33777			Mailing Address 6950 BRYAN DAIRY ROAD LARGO, FL 33777		
2. Principal Place of Business <i>6950 BRYAN DAIRY RD</i>		3. Mailing Address <i>6950 BRYAN DAIRY RD</i>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		10042005 REIN-LLC CR2E101 (6/04)	
City & State <i>LARGO FL</i>		City & State <i>LARGO FL</i>		4. FEI Number 59-3744351	
Zip <i>33777</i>		Country <i>Pinellas</i>		Applied For <input type="checkbox"/> Not Applicable	
Zip <i>33777</i>		Country <i>Pinellas</i>		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
TANEJA, JUGAL K 6950 BRYAN DAIRY ROAD LARGO, FL 33777			Name <i>NO CHANGE</i>		
			Street Address (P.O. Box Number is Not Acceptable)		
			City <i>FL</i>		
			Zip 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.					
SIGNATURE <i>Jugal K. Taneja</i>				DATE <i>10/4/05</i>	
<small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$50.00</b> After January 1, 2006, Fee will be \$100.00		In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR TANEJA, JUGAL K 6950 BRYAN DAIRY ROAD LARGO, FL 33777	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEMBER STEPHEN WATERS 855 DUNBAR AVE OLDS MAR, FL 34677	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>REINSTATEMENT 2005</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEMBER WILLIAM LAGAMBA 5421 KARLSBURG PLACE PALM HARBOR, FL 34685	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>600060780796</b> <b>10/19/05--01063--002 **\$5.00</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEMBER GREGORY JOHNS 6950 BRYAN DAIRY RD LARGO, FL 33777	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
11. I hereby certify that the information supplied with this filing does not qualify 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 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: <i>Jugal K. Taneja</i>				Date <i>10/4/05</i>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>				Daytime Phone # <i>727-544-8866</i>	