

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000012321

FILED
Jul 05, 2006
Secretary of State

Entity Name: MILLENIA REALTY COMPANY, LLC

Current Principal Place of Business:

1834 N.E. 34TH STREET
OAKLAND PARK, FL 33306

New Principal Place of Business:

Current Mailing Address:

1834 N.E. 34TH STREET
OAKLAND PARK, FL 33306

New Mailing Address:

FEI Number: 65-1148468 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:

RAY, LEONA J
4321 NW 7TH STREET
PLANTATION, FL 33317 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: MGR () Delete
Name: EBERLE, THOMAS
Address: 1834 N.E. 34TH STREET
City-St-Zip: OAKLAND PARK, FL 33306

Title: MGR () Delete
Name: EBERLE, DEAN
Address: 4331 NE 18TH AVENUE
City-St-Zip: OAKLAND PARK, FL 33334

Title: MGR () Delete
Name: EBERLE, KRISTINE
Address: 4331 NE 18TH AVENUE
City-St-Zip: OAKLAND PARK, FL 33334

ADDITIONS/CHANGES:

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 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: THOMAS EBERLE

MGR

07/05/2006

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