


# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Feb 15, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # L01000018790 1. Entity Name REALTY ASSET TRUST, LLC	
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Principal Place of Business P.O. BOX 69 CORTEZ, FL 34215	Mailing Address C/O RICHARD J. MUSHINSKI, P.C. 13406 SUNDOWNER DR. HOUSTON, TX 77041
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**DO NOT WRITE IN THIS SPACE**



02042008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 47-0927518	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ZANE, JEFFREY P  
4800 RIVERSIDE DR, STE 101  
PALM BEACH GARDENS, FL 33410

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing)

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

02/26/08-80039-003 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HENSARLING, RONALD L P.O. BOX 69 CORTEZ, FL 34215
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11. 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 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: Ronald Hensarling 2/14/08 561-670-4389  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #