2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L02000003638

Entity Name: FLORIDA REALTY, LLC

JOE, BUKEY

10845 ISLAND GROVE RD

CLERMONT, FL 34711

Name:

Address:

City-St-Zip:

FILED Feb 22, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 16791 SE HWY 42 WEIRSDALE, FL 32195 **Current Mailing Address: New Mailing Address:** 16791 SE HWY 42 WEIRSDALE, FL 32195 FEI Number: 73-1628153 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DE MAN, TIMOTHY P 16791 SÉ HWY 42 WEIRSDALE, FL 32195 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete TIMOTHY, DE MAN Name: Name: Address: 16791 SE HWY 42 Address: City-St-Zip: WEIRSDALE, FL 32195 City-St-Zip: Title: MGR (X) Delete Title: () Change () Addition Name: BRANT, ROBERT Name: Address: 21439 ROYAL TROON DR Address: City-St-Zip: LEESBURG, FL 34748 US City-St-Zip: Title: MGR (X) Delete Title: () Change () Addition DE MAN, TRINIDAD Name: Name: Address: 16791 SE HY 42 Address: City-St-Zip: WEIRSDALE, FL 32195 US City-St-Zip: () Delete Title: MGR Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: TIMOTHY P DE MAN MGR 02/22/2007