2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000006100

Entity Name: FLORIDADIRECT REALTY LLC

FILED Apr 11, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2850 SHORTLEAF CT 9102 BROOKLINE CT

KISSIMMEE, FL 34746 US ORLANDO, FL 32819 US

Current Mailing Address: New Mailing Address:

2850 SHORTLEAF CT 9102 BROOKLINE CT KISSIMMEE, FL 34746 US ORLANDO, FL 32819 US

FEI Number: 33-0996668 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:

BUCHANAN, CAROLE E
2850 SHORTLEAF CT
KISSIMMEE, FL 34746 US

BUCHANAN, CAROLE E
9102 BROOKLINE CT
ORLANDO, FL 32819 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: 04/11/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 BUCHANAN, CAROLE E
 Name:
 BUCHANAN, CAROLE E

 Address:
 2850 SHORTLEAF CT
 Address:
 9102 BROOKLINE CT

 City-St-Zip:
 KISSIMMEE, FL 34746 US
 City-St-Zip:
 ORLANDO, FL 32819 US

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: BUCHANAN, CAROLE E BUCHANAN, CAROLE E

Address: 2850 SHORTLEAF CT Address: 9102 BROOKLINE CT
City-St-Zip: KISSIMMEE, FL 34746 US City-St-Zip: ORLANDO, FL 32819 US

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: CAROLE E BUCHANAN MGRM 04/11/2006