


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2008 08:00 AM
Secretary of State

DOCUMENT # L02000010315	
1. Entity Name REAL ESTATE COLLABORATIVE, LLC	

Principal Place of Business 722 VASSER ST ORLANDO, FL 32804	Mailing Address P.O. BOX 547037 ORLANDO, FL 32804-7037
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DO NOT WRITE IN THIS SPACE



04282008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 42-1606326	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent CHRISTIANSEN, PATRICK T 420 S. ORANGE AVE STE. 1200 ORLANDO, FL 32801

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

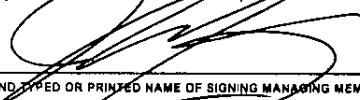
FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM KERSEY, JAMES W 722 VASSAR ST ORLANDO, FL 32804
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR CHRISTIANSEN, PATRICK T 500 IVANHOE PLAZA ORLANDO, FL 32804
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U000000341722
05/28/08-80118-008 138.75

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:  **James W. Kersey** **4/28/08** **407-398-6656**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #