

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000019633

FILED
Apr 11, 2008
Secretary of State

Entity Name: SUMMIT REALTY ADVISORS, LLC

Current Principal Place of Business:

900 EAST INDIANTOWN ROAD
SUITE 311
JUPITER, FL 33477

New Principal Place of Business:

Current Mailing Address:

900 EAST INDIANTOWN ROAD
SUITE 311
JUPITER, FL 33477

New Mailing Address:

FEI Number: 32-0028795

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

IRISH, DAVID W
161 HAMPTON CIRCLE
JUPITER, FL 33458 US

Name and Address of New Registered Agent:

IRISH, DAVID W
4656 SQUARE LAKE DRIVE
PALM BEACH GARDENS, FL 33418 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: DAVID W. IRISH

04/11/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: IRISH, DAVID W
Address: 161 HAMPTON CIRCLE
City-St-Zip: JUPITER, FL 33458

Title: MGRM () Delete
Name: HARNEY, DEBORAH L
Address: 161 HAMPTON CIRCLE
City-St-Zip: JUPITER, FL 33458

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: IRISH, DAVID W
Address: 4656 SQUARE LAKE DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: MGRM (X) Change () Addition
Name: HARNEY, DEBORAH L
Address: 4656 SQUARE LAKE DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33418

I hereby certify that the information supplied with this filing does not qualify 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: DAVID W. IRISH

MGRM

04/11/2008

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