

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000027804

FILED  
Jun 04, 2008  
Secretary of State

Entity Name: L & S REALTY MANAGEMENT, LLC

## Current Principal Place of Business:

6240 TIDEWATER ISLAND CIRCLE  
FORT MYERS, FL 33908

## New Principal Place of Business:

2121MCGREGOR BLVD.  
SUITE 100  
FORT MYERS, FL 33902 US

## Current Mailing Address:

16520 S. TAMIAMI TRAIL  
18-316  
FORT MYERS, FL 33908

## New Mailing Address:

2121MCGREGOR BLVD.  
SUITE 100  
FORT MYERS, FL 33902 US

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

CLASP INC.  
3001 TAMIAMI TRAIL NORTH, 4TH FLOOR  
NAPLES, FL 34013 US

## Name and Address of New Registered Agent:

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:

Title: MGR ( ) Delete  
Name: UMBRELLA PROPERTIES,, L.L.C.  
Address: 16520 S. TAMIAMI TR. #18-316  
City-St-Zip: FT MYERS, FL 33908

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: UMBRELLA PROPERTIES,, L.L.C.  
Address: 2121 MCGREGOR BLVD, STE 100  
City-St-Zip: FT MYERS, FL 33902 US

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: SCOTT ROBERTSON

MGR

06/04/2008

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