


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 16, 2008 8:00 am
Secretary of State

01-16-2008 90055 039 ***138.75

DOCUMENT # L03000002810	
1. Entity Name MANATEE REAL ESTATE SERVICES, LLC	

Principal Place of Business 430 9TH ST EAST BRADENTON, FL 34208	Mailing Address 4803 18TH AVE WEST BRADENTON, FL 34209
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00001000

2. Principal Place of Business - No P.O. Box # 4803 18TH AVE. W.		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State BRADENTON FL		City & State	
Zip 34209	Country MANATEE	Zip	Country



01092008 Chg-LLC CR2E083 (12/06)

6. Name and Address of Current Registered Agent BARNES, GARRET T 3119 MANATEE AVENUE WEST BRADENTON, FL 34205		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR EGGER, DOUGLAS W 4803 18TH AVENUE WEST BRADENTON, FL 34209 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: *Douglas W. Egger* **1-14-08** **941-794-1025**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #