

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000003917

FILED
Apr 30, 2007
Secretary of State

Entity Name: REEF PROPERTIES LLC

Current Principal Place of Business:

1820 N CORPORATE LAKES BLVD SUITE 208
WESTON, FL 33326

New Principal Place of Business:

Current Mailing Address:

1820 N CORPORATE LAKES BLVD SUITE 208
WESTON, FL 33326

New Mailing Address:

FEI Number: 13-4236121

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHROEDER, EUGENE J
15921 SW 53RD CT
SOUTHWEST RANCHES, FL 33331 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: D'ALESSANDRO, ANGELO V
Address: 5610 SW 164TH TERR
City-St-Zip: SOUTHWEST RANCHES, FL 33331

Title: MGRM () Delete
Name: D'ALESSANDRO, ANGELO V
Address: 5610 SW 164TH TERR
City-St-Zip: SOUTHWEST RANCHES, FL 33331

Title: MGRM () Delete
Name: SCHROEDER, EUGENE J
Address: 15921 SW 53RD CT
City-St-Zip: SOUTH WEST RANCHES, FL 33331

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ANGELO DALESSANDRO

MMBR

04/30/2007

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