2006 LIMITED LIABILITY COMPANY

MANAGING MEMBERS/MANAGERS

9.

TITLE NAME

STREET ADDRESS

CITY-ST-ZIP TITLE MARKE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

CITY-ST-ZIP TITLE

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP THTLE

MGR

STORMAN, BRIAN

1901 IOWA AVENUE NE ST. PETERSBURG, FL 33703

Apr 28, 2006 8:00 am Secretary of State ANNUAL REPORT **DOCUMENT # L03000004937** 04-28-2006 90033 012 ****50.00 REAL ESTATE 4 RETIRMENT, LLC Principal Place of Business Mailing Address 1901 IOWA AVENUE NE 1901 IOWA AVENUE NE ST. PETERSBURG, FL 33703 ST. PETERSBURG, FL 33703 01232006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number 20-0760266 \$5.00 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent ARSENAULT, KENNETH G JR DO NOT WRITE 10255 ULMERTON ROAD, STE. 2 LARGO, FL 33771 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. DATE (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2006

DO NOT WRITE IN THIS SPACE

FILED

Applied For

Not Applicable

NAME			
STREET ADDRESS			
CITY-ST-ZIP			
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 rpy 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.			
SIGNAT	TURE: 12 M	4/6/06	(727)522-4488
	SIGNATURE AND TYPED OF FRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE	Date	Davtime Phone #