

**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 04, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # L03000011673

1. Entity Name  
WELLESLEY, LLC



Principal Place of Business  
255 S. ORANGE AVE., STE. 1700  
ORLANDO, FL 32801

Mailing Address  
255 S. ORANGE AVE., STE. 1700  
ORLANDO, FL 32801



**DO NOT WRITE IN THIS SPACE**

01122005No Chg-LLC

CR2E083 (10/03)

4. FEI Number  
56-2346745

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

CHRISTIANSEN, PATRICK T ESQ  
255 S. ORANGE AVE., STE. 1700  
ORLANDO, FL 32801

**DO NOT WRITE  
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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00  
Due by May 1, 2005**

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
MGR  
REAL ESTATE COLLABORATIVE, LLC  
550 IVANHOE PLAZA  
ORLANDO, FL 32804

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
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U00000251534  
03/04/05-80054-022 50.00

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

2-28-05 407-843-7860

Date

Daytime Phone #