


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 25, 2008 08:00 AM
Secretary of State

DOCUMENT # L03000017616 1. Entity Name THE PROFESSIONALS REALTY, LLC	
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Principal Place of Business 87 ROYAL PALM POINTE VERO BEACH, FL 32960 US	Mailing Address 87 ROYAL PALM POINTE VERO BEACH, FL 32960 US
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01042008 No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 75-3117365	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent LANDERS, KENNETH A JR. 87 ROYAL PALM POINTE VERO BEACH, FL 32960
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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

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM LANDERS, KENNETH JR. 87 ROYAL PALM POINTE VERO BEACH, FL 32960
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM SEEBURG, MARK 87 ROYAL PALM POINTE VERO BEACH, FL 32960
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM BOYD, MIKE 87 ROYAL PALM POINTE VERO BEACH, FL 32960
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

<p>000000921344 05/15/08-80003-001 138.75</p> <p>DO NOT WRITE IN THIS SPACE</p>
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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:  **4/20/08 772-299-6080**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #