

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000037173

Entity Name: 1 STOP REALTY LTD. CO.

FILED
Apr 09, 2007
Secretary of State

Current Principal Place of Business:

970 GILFORD ST.
OLDSMAR, FL 34677

New Principal Place of Business:

510 HARBOR GROVE CIRCLE
SAFETY HARBOR, FL 34695

Current Mailing Address:

970 GILFORD ST
OLDSMAR, FL 34677

New Mailing Address:

510 HARBOR GROVE CIRCLE
SAFETY HARBOR, FL 34695

FEI Number: 20-2606786

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCKIRDY, HALFORD J
970 GILFORD ST.
OLDSMAR, FL 34677 US

Name and Address of New Registered Agent:

MCKIRDY, HALFORD J
510 HARBOR GROVE CIRCLE
SAFETY HARBOR, FL 34695 US

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: HALFORD J MCKIRDY

04/09/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MCKIRDY, HALFORD J MR
Address: 970 GILFORD ST.
City-St-Zip: OLDSMAR, FL 34677

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MCKIRDY, HALFORD J MR
Address: 510 HARBOR GROVE CIRCLE
City-St-Zip: SAFETY HARBOR, FL 34695

Title: MGR () Change (X) Addition
Name: MCKIRDY, ANN MRS
Address: 510 HARBOR ROVE CIRCLE
City-St-Zip: SAFETY HARBOR, FL 34695

I hereby certify that the information supplied with this filing does not qualify for the 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: HALFORD J MCKIRDY

MR

04/09/2007

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