2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # L03000037549

1. Entity Name LEARY FAMILY LLC



FILED Mar 12, 2007 08:00 A **Secretary of State**

Principal Place of Business

1115 E. LIVINGSTON ST. ORLANDO, FL 32803

Mailing Address

1115 E. LIVINGSTON ST. ORLANDO, FL 32803



03052007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number Applied For 20-0269309 Not Applicable \$5.00 Additional

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

ROBERT F. VASON, JR., P.A. 501 E. FIFTH AVE. MOUNT DORA, FL 32757

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8. The above named entity submits this statement for the purpose of of the obligations of registered agent.	changing its registered office or registered agent, or both.	in the State of Florida. I am familiar with, and accept
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, 2007

9.	MANAGING MEMBERS/MANAGERS	
TITLE	MGRM	
NAME	LEARY, TAMRA P	
STREET ADDRESS]	
CITY-ST-ZIP	ORLANDO, FL 32803	
TITLE	MGRM	
NAME	LEARY, WILLIAM N	
STREET ADDRESS	1115 EAST LIVINGSTON ST	
CITY-ST-ZIP	ORLANDO, FL 32803	
TITLE		
NAME	,	
STREET ADDRESS		
CITY-ST-ZIP		
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CITY-ST-ZIP		

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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 1 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:

3 5 2007