

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000038827

FILED
Apr 28, 2004
Secretary of State

Entity Name: REES 18, LLC

Current Principal Place of Business:

212 N BAY HILLS BLVD.
SAFETY HARBOR, FL 34695

New Principal Place of Business:

6817 BLUFFS BLVD
TAMPA, FL 33617 US

Current Mailing Address:

212 N BAY HILLS BLVD.
SAFETY HARBOR, FL 34695

New Mailing Address:

6817 BLUFFS BLVD
TAMPA, FL 33617 US

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SHEFMAN, DAVID
212 N BAY HILLS BLVD.
SAFETY HARBOR, FL 34695

Name and Address of New Registered Agent:

BOOS, FREDERICK A MGRM
6817 BLUFFS BLVD
TAMPA, FL 33617 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: FREDERICK A. BOOS

04/28/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: REAL ESTATE EXCHANGE, SERVICES, LLC
Address: 212 N BAY HILLS BLVD.
City-St-Zip: SAFETY HARBOR, FL 34695

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

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BOOS, FREDERICK A MGRM
Address: 6817 BLUFFS BLVD
City-St-Zip: TAMPA, FL 33617 US

Title: MGRM () Change (X) Addition
Name: BOOS, CONSTANCE P MGRM
Address: 6817 BLUFFS BLVD
City-St-Zip: TAMPA, FL 33617 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: FREDERICK A. BOOS

MGRM

04/28/2004

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