

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000012125

FILED
Feb 13, 2007
Secretary of State

Entity Name: PE REALTY, LLC

Current Principal Place of Business:

15 PARADISE PLAZA, #370
SARASOTA, FL 34239

New Principal Place of Business:

5645 KOSTELI PLACE
SARASOTA, FL 34238

Current Mailing Address:

15 PARADISE PLAZA, #370
SARASOTA, FL 34239

New Mailing Address:

5645 KOSTELI PLACE
SARASOTA, FL 34238

FEI Number: 76-0751977

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RENDA, ERNEST F
15 PARADISE PLAZA, #370
SARASOTA, FL 34239 US

Name and Address of New Registered Agent:

RENDA, ERNEST F
5645 KOSTELI PLACE
SARASOTA, FL 34238 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: PETER DELORIA

02/13/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: RENDA, ERNEST F
Address: 15 PARADISE PLAZA, #370
City-St-Zip: SARASOTA, FL 34239

Title: MGRM () Delete
Name: DELORIA, PETER
Address: 15 PARADISE PLAZA, #370
City-St-Zip: SARASOTA, FL 34239

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: RENDA, ERNEST F
Address: 5645 KOSTELI PLACE
City-St-Zip: SARASOTA, FL 34238

Title: MGRM (X) Change () Addition
Name: DELORIA, PETER
Address: 5645 KOSTELI PLACE
City-St-Zip: SARASOTA, FL 34238

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: PETER DELORIA

MEMB

02/13/2007

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