2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000017293

Entity Name: TRADEWINDS REALTY, LLC

FILED Feb 11, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2133 JOCKEY HOLLOW DRIVE NW KENNESAW, GA 30152

Current Mailing Address: New Mailing Address:

2133 JOCKEY HOLLOW DRIVE NW KENNESAW, GA 30152

FEI Number: 34-2033002 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ALWARDT, MADISON E JR ALWARDT, MADISON E JR 3900 OLDFIELD CROSSING DRIVE, APT. 605 5001 TOTEM COURT

JACKSONVILLE, FL 32259 JACKSONVILLE, FL 32223 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: MADISON E. ALWARDT, JR. 02/11/2007

> Electronic Signature of Registered Agent Date

> > ADDITIONS/CHANGES:

MANAGING MEMBERS/MANAGERS:

Title: (X) Change () Addition () Delete

ALWARDT, MADISON E JR ALWARDT, MADISON E JR Name: Name: Address: 3900 OLDFIELD CROSSING DRIVE, APT. 605 Address: 5001 TOTEM COURT City-St-Zip: JACKSONVILLE, FL 32223 City-St-Zip: JACKSONVILLE, FL 32259

Title: MGR Title: MGR

(X) Change () Addition () Delete Name: ALWARDT, RYAN M Name: ALWARDT, RYAN M

Address: 3900 OLDFIELD CROSSING DRIVE, APT. 605 Address: 5001 TOTEM COURT City-St-Zip: JACKSONVILLE, FL 32223 City-St-Zip: JACKSONVILLE, FL 32259

Title: MGR () Delete Title: () Change () Addition

ALWARDT, JASON M Name: Name: 2133 JOCKEY HOLLOW DRIVE NW Address: Address: City-St-Zip: KENNESAW, GA 30152 City-St-Zip:

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: JASON M. ALWARDT 02/11/2007