2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000040034

1. Entity Name

CUMBERLAND REALTY GROUP, LLC



FILED Mar 26, 2007 08:00 AM Secretary of State

Principal Place of Business

200 NW 5TH STREET OKEECHOBEE, FL 34972 Mailing Address

200 NW 5TH STREET OKEECHOBEE, FL 34972



DO NOT WRITE IN THIS SPACE

03092007 No Chg-LLC CR2E083 (11/05)

4. FEI Number Applied For 7.3-1705368 Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BATTON, ELBERT R 200 NW 5TH STREET OKEECHOBEE, FL 34972

DO NOT WRITE IN THIS SPACE

		IN THIS SPACE
8. The above the obligat	named entity submits this statement for the purpose of cha- tions of registered agent.	nging 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
Fi D	iling Fee is \$50.00 ue by May 1, 2007	
9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME. STREET ADDRESS CITY-ST-ZIP	MGR BATTON, ELBERT R 200 NW 5TH STREET OKEECHOBEE, FL 34972	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		U00000678735 04/03/07-80010-005 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
NAME STREET ADDRESS CITY-ST-7IP		IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I 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.

SIGNATURÉ:

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-7IP

M Sallo

3/23/07