

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 02, 2007 8:00 am
Secretary of State

04-02-2007 90437 014 ****50.00

DOCUMENT # L04000058501

1. Entity Name
FOUNDATION REALTY SERVICES, LLC



Principal Place of Business Mailing Address
1043 SHADY LAKES CIRCLE S. **1043 SHADY LAKES CIRCLE S.**
PALM BEACH GARDENS, FL 33418 US **PALM BEACH GARDENS, FL 33418 US**

60031237



2. Principal Place of Business - No P.O. Box # 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.

03272007 Chg-LLC CR2E083 (12/06)

City & State City & State 4. FEI Number 20-1518445 Applied For Not Applicable

Zip- Country Zip Country 5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent
MURRAY, JAMES D JR. Name
1043 SHADY LAKES CIRCLE S. Street Address (P.O. Box Number is Not Acceptable)
PALM BEACH GARDENS, FL 33418 City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

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**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MURRAY, JAMES D JR. 1043 SHADY LAKES CIRCLE S. PALM BEACH GARDENS, FL 33418 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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. 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.

SIGNATURE: 3/27/07 Date Daytime Phone #