

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000064444

FILED
Mar 01, 2008
Secretary of State

Entity Name: REAL ESTATE HOLDINGS OF FLORIDA LLC

Current Principal Place of Business:

7449 PINE LAKES BLVD.
PORT SAINT LUCIE, FL 34952

New Principal Place of Business:

6849 NW JORGENSEN RD
PORT SAINT LUCIE, FL 34983

Current Mailing Address:

7449 PINE LAKES BLVD.
PORT SAINT LUCIE, FL 34952

New Mailing Address:

6849 NW JORGENSEN RD
PORT SAINT LUCIE, FL 34983

FEI Number: 56-2487211

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE, WILLIAM G JR
7449 PINE LAKES BLVD.
PORT SAINT LUCIE, FL 34952 US

Name and Address of New Registered Agent:

MOORE, WILLIAM G JR
6849 NW JORGENSEN RD.
PORT SAINT LUCIE, FL 34983 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: WILLIAM G. MOORE JR.

03/01/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MOORE, WILLIAM G JR
Address: 7449 PINE LAKES BLVD.
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: MGRM () Delete
Name: MOORE, ALICIA A
Address: 7449 PINE LAKES BLVD.
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: MGRM () Delete
Name: MOORE, WILLIAM G SR
Address: 1609 N. 18TH STREET
City-St-Zip: FT. PIERCE, FL 34950

Title: MGRM () Delete
Name: MOORE, ANNIE D
Address: 1609 N. 18TH STREET
City-St-Zip: FT. PIERCE, FL 34950

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MOORE, WILLIAM G JR
Address: 6849 NW JORGENSEN RD.
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: MGRM (X) Change () Addition
Name: MOORE, ALICIA A
Address: 6849 NW JORGENSEN RD
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: WILLIAM G. MOORE JR.

MGRM

03/01/2008

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