

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000064917

1. Entity Name
FLORIDA REALTY REFERRAL NETWORK, LLC



FILED
Jul 09, 2008 08:00 AM
Secretary of State

Principal Place of Business
4455 MILITARY TRAIL
SUITE 100
JUPITER, FL 33458 US

Mailing Address
4455 MILITARY TRAIL
SUITE 100
JUPITER, FL 33458 US



07072008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-2551204

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

KILCULLEN, KATHERINE M
2901 PGA BLVD.
SUITE 100
PALM BEACH GARDENS, FL 33410

**DO NOT WRITE
IN THIS SPACE**

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 _____

FILE NOW!!! FEE IS \$138.75
Due by September 12, 2008

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM
NAME POSESS, CHARLES F
STREET ADDRESS 2901 PGA BLVD., SUITE 100
CITY-ST-ZIP PALM BEACH GARDENS, FL 33410

TITLE MGRM
NAME BRUE, MICHAEL J
STREET ADDRESS 2901 PGA BLVD, SUITE 100
CITY-ST-ZIP PALM BEACH GARDENS, FL 33410

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U00000953678
07/09/08-80001-020 138.75

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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.

SIGNATURE: Charles Possess

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

7/7/08