
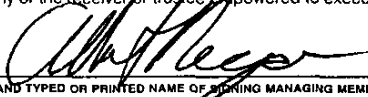


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 10, 2005 8:00 am
Secretary of State

02-10-2005 90192 037 ****50.00

DOCUMENT # L04000065359 1. Entity Name FIRST CHOICE REALTY OF OCALA, LLC					
Principal Place of Business 2216 E. SILVER SPRINGS BLVD., STE. 3 OCALA, FL 34471			Mailing Address 2216 E. SILVER SPRINGS BLVD., STE. 3 OCALA, FL 34471		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 20-1571923	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent HICKS, DANIEL 421 SOUTH PINE AVENUE OCALA, FL 34474-4175				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR REGA, ALBERT 2216 E. SILVER SPRINGS BLVD., STE. 3 OCALA, FL 34471	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GODIN, GARRETT P TRUSTEE 2216 E. SILVER SPRINGS BLVD., STE. 3 OCALA, FL 34471	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GODIN, GARRETT P TRUSTEE 2216 E. SILVER SPRINGS BLVD., STE. 3 OCALA, FL 34471	<input type="checkbox"/> Delete			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GODIN, GARRETT P TRUSTEE 2216 E. SILVER SPRINGS BLVD., STE. 3 OCALA, FL 34471	<input type="checkbox"/> Delete			
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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.			2-7-05		
SIGNATURE: 			Date		