

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000084511

FILED
Sep 09, 2005
Secretary of State

Entity Name: NORTH FLORIDA REALTY, LLC

Current Principal Place of Business:

1823 WAGON WHEEL CIRCLE WEST
TALLAHASSEE, FL 32317

New Principal Place of Business:

415 VINNEDGE RIDE
TALLAHASSEE, FL 32303

Current Mailing Address:

1823 WAGON WHEEL CIRCLE WEST
TALLAHASSEE, FL 32317

New Mailing Address:

415 VINNEDGE RIDE
TALLAHASSEE, FL 32303

FEI Number: 59-3789805 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

FRAZIER, SEANN M
415 VINNEDGE RIDE
TALLAHASSEE, FL 32303 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BOUTHILLIER, JEFFREY J
Address: 1823 WAGON WHEEL CIRCLE WEST
City-St-Zip: TALLAHASSEE, FL 32317

Title: MGRM () Delete
Name: BOUTHILLIER, JOSEPH
Address: 1823 WAGON WHEEL CIRCLE WEST
City-St-Zip: TALLAHASSEE, FL 32317

Title: MGRM () Delete
Name: FRAZIER, SEANN M
Address: 1823 WAGON WHEEL CIRCLE WEST
City-St-Zip: TALLAHASSEE, FL 32317

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BOUTHILLIER, JEFFREY J
Address: 415 VINNEDGE RIDE
City-St-Zip: TALLAHASSEE, FL 32303

Title: MGRM (X) Change () Addition
Name: BOUTHILLIER, JOSEPH
Address: 415 VINNEDGE RIDE
City-St-Zip: TALLAHASSEE, FL 32303

Title: MGRM (X) Change () Addition
Name: FRAZIER, SEANN M
Address: 415 VINNEDGE RIDE
City-St-Zip: TALLAHASSEE, FL 32303

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SEANN M. FRAZIER

MGRM

09/09/2005

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