2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 27, 2005 8:00 am Secretary of State 04-27-2005 90032 014 ****50.00

DOCUMENT # L04000088981 1. Entity Name TOTAL REALTY SERVICES, LLC							04-27-2003	90032 01	.4 50	5.00	
Principal Place of Business 1612 THORNHILL CIRCLE OVIEDO, FL 33765			Mailing Address 1612 THORNHILL CIRCLE OVIEDO, FL 33765			11060111	2100 21 Halli wil wil wil	38 7	13 0 (81) 0 1 (80) 3 0 (11)	1184 W 1881	
2. Principal Place of Business		3. Mailing Address									
Suite, Apt. #, etc.		Suite, Apt. #, etc.			04092005	Chg-LLC	CR2E0	83 (10/03)			
City & State		City & State		4. FEI Numt 20 -	0er 1973€	73	<u> </u>	oplied For of Applicable			
Zip	Zip Country		Zip Country		itry	5. Certificat	e of Status Desired		\$5.00 Add Fee Require		
	6. Name at	nd Address of Current R	egistered Agent			7. Name an	d Address of New R	legistered /	\gent		
LINDSAY, JOHN E 1612 THORNHILL CIRCLE OVIEDO, FL 33765						Name Street Address (P.O. Box Number is Not Acceptable)					
- · · · , ·					City				Zip Cod		
The above named entity submits this statement for the purpose of changing its regi							FL Zip Code				
	named entity s tions of register		the purpose of changing its	register	ed office or reg	gistered agent, or b	oth, in the State of Flo	orida. I am f	amiliar with,	and accept	
SIGNATURE .	Signature, typed or p	printed name of registered agent an	d title if applicable. (NOT	E: Registere	d Agent signature re	required when reinstating)	_	DATE			
	Filing Fee Is \$50.00 Due by May 1, 2005										
								e check partme	ayable to ent of State	e	
	ue by May '		S/MANAGERS	10.			Florida	a Departme	ent of State		
9.	MGRM	1, 2005 MANAGING MEMBER	S/MANAGERS	IUF	E	MERW Nancy	Florida	a Departme	ent of State		
9.	MGRM LINDSAY, J	1, 2005 MANAGING MEMBER		TITL	E IE EET ADDRESS	MERM Mancy 300 Meu	Florida	a Departme	ent of State		
9. TITLE NAME	MGRM LINDSAY, J	1, 2005 MANAGING MEMBER OHN E NHILL CIRCLE		TITLI NAM STRE	E E EET ADDRESS -ST-ZIP	MERM Mancy 300 Meu Jongwa	Florida	a Departme	ent of State		
9. IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MGRM LINDSAY, J 1612 THOR OVIEDO, FL MGRM	MANAGING MEMBER OHN E NHILL CIRCLE L 33765		ITTLI	۱ ا	MERM Mancy 300 Med Longwa	Florida	a Departme	ent of State		
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9. IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MGRM LINDSAY, J 1612 THOR OVIEDO, FI MGRM ROBERTSO 36638 NASI	MANAGING MEMBER OHN E NHILL CIRCLE L 33765 DN, JAMES W	☐ Delete	TITLE NAM STRE CITY TITLE NAM STRE	۱ ا	MERM Mancy 300 Meu Longwa	Florida	a Departme	Change	Addition	
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Thereby certify that the information supplied with this titing does not qualify 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MA