



2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 05, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000000347 1. Entity Name THREE RIVERS REALTY, LLC	
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Principal Place of Business 16069 GRANDIN AVE PORT CHARLOTTE, FL 33954	Mailing Address PO BOX 380921 MURDOCK, FL 33938
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DO NOT WRITE IN THIS SPACE



05012008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-2093641	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

8. Name and Address of Current Registered Agent

**PLATT, DANIEL B
 16069 GRANDIN AVE
 PORT CHARLOTTE, FL 33954**

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:  DATE: 5/1/08

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

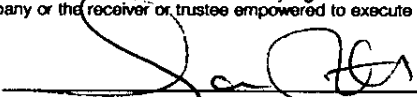
9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PLATT, DANIEL B 16069 GRANDIN AVE PORT CHARLOTTE, FL 33954
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 05/30/08-80072-006 138.75

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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:  Date: 5/1/08 Daytime Phone #: 941-457-9646

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