

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000007514

FILED
Feb 13, 2009
Secretary of State

Entity Name: OMNI REAL ESTATE INVESTMENT SERVICES, LLC

Current Principal Place of Business:

12610 NEW BRITTANY BOULEVARD
FORT MYERS, FL 33907

New Principal Place of Business:

Current Mailing Address:

12610 NEW BRITTANY BOULEVARD
FORT MYERS, FL 33907

New Mailing Address:

FEI Number: 20-2233861

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREEN, BRUCE D
1520 ROYAL PALM SQUARE BOULEVARD, STE 320
FT MYERS, FL 33919 US

Name and Address of New Registered Agent:

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: ST () Delete
Name: HARRELSON, TREVOR W
Address: 7821 REFLECTING POND CT #1712
City-St-Zip: FORT MYERS, FL 33907

Title: PRES () Delete
Name: WOLSTENHOLME, ALBERT
Address: 8323 SHORECREST DRIVE
City-St-Zip: FORT MYERS, FL 33912

ADDITIONS/CHANGES:

Title: ST (X) Change () Addition
Name: HARRELSON, TREVOR W
Address: 9320 VITTORIA COURT
City-St-Zip: FORT MYERS, FL 33912

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: TREVOR W HARRELSON

ST

02/13/2009

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