2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000013852

Entity Name: REAL HOMESTEAD LLC

City-St-Zip:

TALLAHASSEE, FL 32308

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 860 OAK PARK ROAD SOPCHOPPY, FL 32358 **Current Mailing Address: New Mailing Address:** 860 OAK PARK ROAD SOPCHOPPY, FL 32358 FEI Number: 38-3715885 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SIMMONS, SAMUEL W 860 OAK PARK ROAD SOPCHOPPY, FL 32358 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete SIMMONS, SAMUEL W Name: Name: Address: 860 OAK PARK ROAD Address: City-St-Zip: SOPCHOPPY, FL 32358 City-St-Zip: Title: MGRM Title: () Delete () Change () Addition Name: ASH, CRAIG L Name: Address: 24 ALLEN STREET Address: City-St-Zip: SOPCHOPPY, FL 32358 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition SIMPSON, CHAN Name: Name: Address: 4714 MAYAHN DR Address:

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.

City-St-Zip:

SIGNATURE: SAMUEL SIMMONS MGRM 04/29/2009