2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000014309

Entity Name: REAL ESTATE INDUSTRY SOLUTIONS, LLC

FILED Mar 24, 2011 Secretary of State

New Principal Place of Business: Current Principal Place of Business:

7025 AUGUSTA NATIONAL DRIVE ORLANDO, FL 328225017

Current Mailing Address: New Mailing Address:

P O BOX 725025 ORLANDO, FL 328725025 US

FEI Number: 84-1690773 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:

SHUFFIELD LOWMAN ARNSTEIN & LEHR LLP 1000 LEGION PLACE SUITE 1700 302 KINGHTS RUN AVENUE ORLANDO, FL 32801 SUITE 1100 TAMPA, FL 33602 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: VANESSA N. COHN 03/24/2011

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

PC00

BALLARINO, JOSEPH S Name: Address: 15541 VALLECAS LN City-St-Zip: NAPLES, FL 34110 US

Title:

Name: GREENE, SUMMER J Address: 2700 E. OAKLAND PARK BLVD City-St-Zip: FORT LAUDERDALE, FL 33306 US

Title:

HUDGENS, BOB S Name: Address: 111 BEAL PARKWAY SE

City-St-Zip: FORT WALTON BEACH, FL 32548 US

Title:

Name: STEPHAN, RON

7801 DEERCREEK CLUB ROAD SUITE 1 Address:

City-St-Zip: JACKSONVILLE, FL 32256 US

Title:

BUTTERS, ROBERT D Name:

120 SOUTH RIVERSIDE PLAZA SUITE 1200 Address:

City-St-Zip: CHICAGO, IL 60606 US

Title:

FRIDLINGTON, JOHN Name:

Address: 7025 AUGUSTA NATIONAL DRIVE ORLANDO, FL 328225017 US City-St-Zip:

I hereby 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 Statues.

SIGNATURE: JOSEPH S. BALLARINO 03/24/2011

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