

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000024858

FILED  
Jul 09, 2007  
Secretary of State

**Entity Name:** AMSTAR REALTY OF CENTRAL FLORIDA LLC

**Current Principal Place of Business:**

8516 OLD WINTER GARDEN RD  
SUITE 203  
ORLANDO, FL 32835

**New Principal Place of Business:**

13335 WEST COLONIAL DRIVE  
WINTER GARDEN, FL 34787

**Current Mailing Address:**

13335 WEST COLONIAL DR  
WINTER GARDEN, FL 34787

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

MAYRA, ROMAN  
8516 OLD WINTER GARDEN RD  
SUITE 203  
ORLANDO, FL 32835 US

**Name and Address of New Registered Agent:**

MAYRA, ROMAN  
13335 WEST COLONIAL DR  
WINTER GARDEN, FL 34787 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:

07/09/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MR ( ) Delete  
Name: ALCIDES, ROMAN  
Address: 8516 OLD WINTER GARDEN RD SUITE 203  
City-St-Zip: ORLANDO, FL 32835

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MR (X) Change ( ) Addition  
Name: ALCIDES, ROMAN  
Address: 13335 WEST COLONIAL DRIVE  
City-St-Zip: WINTER GARDEN, FL 34787

Title: MGRM ( ) Change (X) Addition  
Name: ROMAN, MAYRA  
Address: 13335 WEST COLONIAL DRIVE  
City-St-Zip: WINTER GARDEN, FL 34787

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: MAYRA ROMAN

MGRM

07/09/2007

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