2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000025299

1. Entity Name SECURED REALTY, LLC



FILED Jan 11, 2008 08:00 AN Secretary of State

Principal Place of Business

Maiting Address

4 VIA ANGELICO

PALM BEACH GARDENS, FL 33418

4 VIA ANGELICO PALM BEACH GARDENS, FL 33418



01052008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 02-0734966

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SCALTRITO, FRANK A

AT COURT OF SHEET OF STOLE SO HOWERS WHEN OF STORE SO

STREET ADDRESS CITY-ST-ŽIP

DO NOT WRITE

4 VIA ANGELICO PALM BEACH GARDENS, FL 33418		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		
, oldivitorica	Signature, typed or printed name of registered agent and title if applicable. (NOI	E: Registered Agent signature required when reinstating) DATE
	NOW!!! FEE IS \$138.75 1, 2008 Fee will be \$538.75	
9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS	MGR SCALTRITO, FRANK A 4 VIA ANGELICO	
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418	U00000779708
NAME STREET ADDRESS CITY-ST-ZIP		01/11/0 0 -80043-805 138.(5
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
TITLE MAME STREET ADDRESS CITY-ST-ZIP	,	
tmr	- ^*	

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.