

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000031265

Entity Name: 1440 REALTY GROUP, LLC

FILED
Mar 08, 2007
Secretary of State

Current Principal Place of Business:

P.O. BOX 54741
JACKSONVILLE, FL 32245

New Principal Place of Business:

13085 SIR RODGERS CT. SOUTH
JACKSONVILLE, FL 32224

Current Mailing Address:

P.O. BOX 54741
JACKSONVILLE, FL 32245

New Mailing Address:

FEI Number: 20-2584796

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIXON, OMARR
13085 SIR RODGERS COURT S.
JACKSONVILLE, FL 32224 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: MGRM () Delete
Name: DIXON, OMARR
Address: P.O. BOX 54741
City-St-Zip: JACKSONVILLE, FL 32245

Title: MGRM () Delete
Name: DIXON, KAHISHA
Address: P.O. BOX 54741
City-St-Zip: JACKSONVILLE, FL 32245

ADDITIONS/CHANGES:

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: OMARR C. DIXON

MGRM

03/08/2007

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