

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000031998

Entity Name: CONDOMAX REALTY, LLC

FILED  
Jul 18, 2007  
Secretary of State

## Current Principal Place of Business:

5200 BELFORT RD, STE 250  
JACKSONVILLE, FL 32256

## New Principal Place of Business:

656 ALHAMBRA CIRCLE  
CORAL GABLES, FL 33134

## Current Mailing Address:

5200 BELFORT RD, STE 250  
JACKSONVILLE, FL 32256

## New Mailing Address:

656 ALHAMBRA CIRCLE  
CORAL GABLES, FL 33134

FEI Number: 37-1511186      FEI Number Applied For ( )      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:

ALBERTELLI & ASSOCIATES, P.L.  
330 A1A NORTH, STE 324  
PONTE VEDRA BEACH, FL 32082      US

## Name and Address of New Registered Agent:

DORIS MYERS  
656 ALHAMBRA CIRCLE  
CORAL GABLES, FL 33134      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: DORIS MYERS

07/18/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR      ( ) Delete  
Name: MYERS, DORIS  
Address: 5200 BELFORT RD, STE 250  
City-St-Zip: JACKSONVILLE, FL 32256

## ADDITIONS/CHANGES:

Title: P      (X) Change ( ) Addition  
Name: MYERS, DORIS  
Address: 656 ALHAMBRA CIRCLE  
City-St-Zip: CORAL GABLES, FL 33134

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: DORISA MYERS

P

07/18/2007

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