

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000054058

**FILED**  
**Sep 06, 2006**  
**Secretary of State**

**Entity Name:** REAL ESTATE RENOVATION & RECOVERY LLC

**Current Principal Place of Business:**

2841 SOUTH SANFORD AVENUE  
SANFORD, FL 32773

**New Principal Place of Business:**

**Current Mailing Address:**

2841 SOUTH SANFORD AVENUE  
SANFORD, FL 32773

**New Mailing Address:**

3665 S. ORLANDO DRIVE  
#144  
SANFORD, FL 32773

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**  
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:**

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

MELVIN, MARSHA  
2841 SOUTH SANFORD AVENUE  
SANFORD, FL 32773 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGR ( ) Delete  
Name: MELVIN, MARSHA  
Address: 2841 SOUTH SANFORD AVENUE  
City-St-Zip: SANFORD, FL 32773

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: MARSHA MELVIN

MGR

09/06/2006

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