

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000057814

Entity Name: REAL ESTATE NC, LLC

FILED
May 01, 2006
Secretary of State

Current Principal Place of Business:

821 ELLWOOD AVE
ORLANDO, FL 32804

New Principal Place of Business:

Current Mailing Address:

821 ELLWOOD AVE
ORLANDO, FL 32804

New Mailing Address:

FEI Number: 02-0744750 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:

Name and Address of New Registered Agent:

KOEGEL, BRADEN S
821 ELLWOOD AVE
ORLANDO, FL 32804 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:

Title: MGRM () Delete
Name: KOEGEL, JOHN A
Address: 3302 TALA LOOP AVE
City-St-Zip: LONGWOOD, FL 32779

Title: MGR (X) Delete
Name: CHOPRA, RAJAT K
Address: 318 BELHAVEN FALLS DR
City-St-Zip: OCOEE, FL 34761

Title: MGR () Delete
Name: WOODS, JUSTIN T
Address: 602 NOTRE DAME DR.
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

ADDITIONS/CHANGES:

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

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: JOHN A. KOEGEL

MGRM

05/01/2006

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