


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 07, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000074747 1. Entity Name BOGLE REALTY, LLC	
---	---

Principal Place of Business 7975 KILKENNY WAY NAPLES, FL 34112	Mailing Address 7975 KILKENNY WAY NAPLES, FL 34112
--	--

DO NOT WRITE IN THIS SPACE



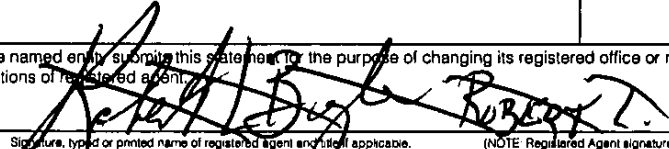
01232007No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-3273808	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent BOGLE, ROBERT 7975 KILKENNY WY NAPLES, FL 34112	DO NOT WRITE 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  DATE _____

Signature, typed or printed name of registered agent and if not applicable. (NOTE: Registered Agent signature required when reinstating)

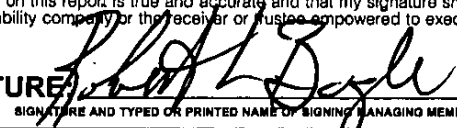
**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BOGLE, ROBERT L 7975 KILKENNY WAY NAPLES, FL 34112
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BOGLE, MICHAEL R 24 EAGLETON FARMS ROAD NEWTOWN, PA 18940
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RODDEN, DANIEL 411 SPRUCE CIRCLE EXTON, PA 19341
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SWANSON, CHRIS D 404 GRAND OAK LANE EXTON, PA 19341
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000624934
02/14/07-80054-024 50.00

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE  DATE 2/5/07 239.777-7583

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE