

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000076788

FILED
Apr 10, 2008
Secretary of State

Entity Name: REALAVEST LLC

Current Principal Place of Business:

505 WEKIVA SPRINGS ROAD
SUITE 800
LONGWOOD, FL 32779 US

New Principal Place of Business:

Current Mailing Address:

505 WEKIVA SPRINGS ROAD
SUITE 800
LONGWOOD, FL 32779 US

New Mailing Address:

FEI Number: 02-0751736

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BELL, THOMAS H
505 WEKIVA SPRINGS ROAD
SUITE 800
LONGWOOD, FL 32779 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: MGR () Delete
Name: BELL, THOMAS H
Address: 505 WEKIVA SPRINGS ROAD SUITE 800
City-St-Zip: LONGWOOD, FL 32779 US

Title: MGR () Delete
Name: DAVIS, DANIEL E
Address: 407 WEKIVA SPRINGS ROAD, SUITE 219
City-St-Zip: LONGWOOD, FL 32779 US

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 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: THOMAS H. BELL

MGR

04/10/2008

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