

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000077165

Entity Name: REALTY ATLANTIC, LLC

FILED
May 01, 2006
Secretary of State

Current Principal Place of Business:

1 FLORIDA PARK DRIVE SOUTH, SUITE 300
PALM COAST, FL 32137

New Principal Place of Business:

1 FLORIDA PARK DRIVE SOUTH
SUITE 300
PALM COAST, FL 32137

Current Mailing Address:

1 FLORIDA PARK DRIVE SOUTH, SUITE 300
PALM COAST, FL 32137

New Mailing Address:

1 FLORIDA PARK DRIVE SOUTH
SUITE 300
PALM COAST, FL 32137

FEI Number: 20-3288000 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:

SEPS, DONALD J
1 FLOIRDA PARK DRIVE SOUTH, ATRIUM SUITE
PALM COAST, FL 32137 US

Name and Address of New Registered Agent:

HAMATY, CLAUDIA H
1 FLORIDA PARK DRIVE SOUTH
SUITE 300
PALM COAST, FL 32137 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: CLAUDIA H. HAMATY

05/01/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: HAMATY, RONALD E
Address: 1 FLORIDA PARK DRIVE SOUTH, SUITE 300
City-St-Zip: PALM COAST, FL 32137

ADDITIONS/CHANGES:

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: RONALD E HAMATY

MGR

05/01/2006

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