

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 19, 2007 08:00 A
Secretary of State

DOCUMENT # L05000086203

1. Entity Name
GUARANTEED REALTY REFERRALS, LLC



Principal Place of Business

**% C.B. WILLIAMS, GUARANTEED REALTY REFER.
8902 NORTH DALE MABRY HIGHWAY, SUITE 101
TAMPA, FL 33614**

Mailing Address

**% C.B. WILLIAMS, GUARANTEED REALTY REFER.
8902 NORTH DALE MABRY HIGHWAY, SUITE 101
TAMPA, FL 33614**



04182007No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

61-1495451

Applied For

Not Applicable

5. Certificate of Status Desired



**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**WILLIAMS, C.B.
GUARANTEED REALTY REFERRALS, LLC
8902 NORTH DALE MABRY HIGHWAY, SUITE 101
TAMPA, FL 33614**

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
WILLIAMS, C.B.
8902 NORTH DALE MABRY HIGHWAY, SUITE 101
TAMPA, FL 33614**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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IN THIS SPACE**

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05/01/07-80018-010 55.00

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: *CB Williams*

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

4-16-2007 **813-933-0677** x 10

Date

Daytime Phone #