

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000088447

FILED  
Mar 03, 2007  
Secretary of State

Entity Name: NEW INVESTMENTS GROUP REALTY, LLC

**Current Principal Place of Business:**

4700 MILLENIA BLVD.  
SUITE 175  
ORLANDO, FL 32839

**New Principal Place of Business:**

**Current Mailing Address:**

4700 MILLENIA BLVD.  
SUITE 175  
ORLANDO, FL 32839

**New Mailing Address:**

FEI Number: 13-4306191

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MILLER, DEBBIE  
4700 MILLENIA BLVD., SUITE 175  
ORLANDO, FL 32839 US

**Name and Address of New Registered Agent:**

MILLER, DEBBIE  
4700 MILLENIA BLVD  
SUITE 175  
ORLANDO, FL 32839 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:

03/03/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: GANDY, MARIA  
Address: 4700 MILENIA BLVD SUITE 175  
City-St-Zip: ORLANDO, FL 32839

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: MILLER, DEBBIE  
Address: 4700 MILLENIA BLVD SUITE 175  
City-St-Zip: ORLANDO, FL 32839

Title: MGR ( ) Change (X) Addition  
Name: JEFFERY, GUY  
Address: 4700 MILLENIA BLVD SUITE 175  
City-St-Zip: ORLANDO, FL 32839

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: GUY JEFFERY

MGR

03/03/2007

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