## 2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

## DOCUMENT # L05000089465

1. Entity Name CONDEV REALTY, LLC



## **FILED** Apr 19, 2007 8:00 am Secretary of State 04-19-2007 90026 003 \*\*\*\*50.00

			1	115						
Principal Place of Business 2479 ALOMA AVENUE WINTER PARK, FL 32792		Mailing Address 2479 ALOMA AVENUE WINTER PARK, FL 32792			y,	<b>Ι</b> υυνν-				
400 1	Place of Business - No P.O. Box # N. MOTSE Blvd.	3. Mailing Address PO Box 1748								
Suite, Apt.	#, etc. /D/	Suite, Apt. #, etc.			04042007	Chg-LLC	CR2E0	83 (12/06)		
City & Stat		Winter Park, FL			4. FEI Numb			1	oplied For ot Applicable	
3278	Country	32790 Country			5. Certificate of Status Desired  \$5.00 Additional Fee Required					
	6. Name and Address of Current I	Registered Agent	I Agent 7.			7. Name and Address of New Registered Agent				
MCMULLEN, JACK K				Name Character (D.O. P. a.)						
301 E. PINE STREET, SUITE 1400 ORLANDO, FL 32801				Street Address (P.O. Box Number is Not Acceptable)						
			City				FL	Zip Code	e	
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 algorature required when reinstating)    DATE										
	against these or busines rating to registered again a	(NOTE	nogisieleu Agent se	Aratore recover	when remstating)	<u> </u>	UATE			
	iling Fee is \$50.00 ue by May 1, 2007				Make check payable to Florida Department of State					
9.	MANAGING MEMBER	RS/MANAGERS	10.			ADDITIONS/0	CHANGES			
TITLE	MGR	☐ Delete	TITLE					Change	☐ Addition	
NAME	GARDNER, ANDREW M		NAME			_		_	_	
STREET ADDRESS	2479 ALOMA AVENUE		STREET ADDRES	ss HO	OW. N	horse Blv.	ራ, St	2101		
CITY-ST-ZIP	WINTER PARK, FL 32792	<u> </u>	CITY-ST-ZIP	Wir	rter Fa	<u>sk</u> , FL 3	378	9		
TITLE	MGR	☐ Delete	TITLE			•		<b>C</b> hange	☐ Addition	
NAME	GARDNER, CHRISTOPHER J		NAME	ممال		VI				
STREET ADDRESS CITY-ST-ZIP	2479 ALOMA AVENUE		STREET ADDRES		ا ` ∧ ` ا	Morse Bly		10.	l	
	WINTER PARK, FL 32792		ÇITY-ST-ZIP	M/v	rter Po	WK, FL 3	3 <u>2 7 8</u>			
TITLE NAME		☐ Delete	TITLE	-				Change	Addition	
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CITY-ST-ZIP			CITY-ST-ZIP	33						
TITLE		☐ Delete	TITLE	_			•••	Change	Addition	
NAME STREET ADDRESS			NAME CAREET ARREST						)	
CITY-ST-ZIP			STREET ADDRES	»						
TITLE		☐ Delete	TITLE	+				☐ Change		
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TITLE		☐ Delete	TITLE					☐ Change	Addition	
NAME			NAME							
STREET ADDRESS			STREET ADDRES	ss						
CITY-ST-ZIP			CITY-ST-ZIP							
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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #