

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000091259

FILED
Aug 31, 2006
Secretary of State

Entity Name: EXCITE REALTY OF FLORIDA, LLC

Current Principal Place of Business:

11767 S DIXIE HIGHWAY
106
MIAMI, FL 33156 US

New Principal Place of Business:

1920 SW 36TH TER
CAPE CORAL, FL 33904 US

Current Mailing Address:

11767 S DIXIE HIGHWAY
106
MIAMI, FL 33156 US

New Mailing Address:

1217 CAPE CORAL PKWY E
392
CAPE CORAL, FL 33904 US

FEI Number: 20-3454764 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:

JINGZHI ASSOCIATES INC
11767 S DIXIE HIGHWAY
106
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

JINGZHI ASSOCIATES INC
1217 CAPE CORAL PKWY E
392
CAPE CORAL, FL 33904 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: CRAIG W CHRISTIANSON

08/31/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CHRISTIANSON, CRAIG W P.A.
Address: 1920 SW 36TH TERRACE
City-St-Zip: CAPE CORAL, FL 33914 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: CRAIG W. CHRISTIANSON, N, P.A.
Address: 1920 SW 36TH TER
City-St-Zip: CAPE CORAL, FL 33914 US

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: CRAIG W CHRISTIANSON

MGR

08/31/2006

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