2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 17, 2006
Secretary of State

DOCUMENT# L05000098920

Entity Name: SOUTHWIND I, LLC

Current Principal Place of Business:

802 2ND STREET NORTH, SUITE A
SAFETY HARBOR, FL 34695

New Principal Place of Business:

3535 DOUGLAS PLACE
PALM HARBOR, FL 34683

Current Mailing Address:

802 2ND STREET NORTH, SUITE A
SAFETY HARBOR, FL 34695

New Mailing Address:

3535 DOUGLAS PLACE
PALM HARBOR, FL 34683

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:

SHEFMAN, MARGA
802 2ND STREET NORTH, SUITE A
SAFETY HARBOR, FL 34695 US

Name and Address of New Registered Agent:

ALLEN, DAVID
3502 HENDERSON BLVD.
TAMPA, FL 33609 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: DAVID ALLEN 07/17/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: REAL ESTATE EXCHANGE, SERVICES, INC .
Address: 802 2ND STREET NORTH, SUITE A
City-St-Zip: SAFETY HARBOR, FL 34695

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: GRANTHAM, ALEXANDER V
Address: 3535 DOUGLAS PLACE
City-St-Zip: PALM HARBOR, FL 34683

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: ALEXANDER V GRANTHAM MGRM 07/17/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date