

**2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Feb 16, 2009  
Secretary of State**

DOCUMENT# L05000100114

Entity Name: TEAM REALTY OF SARASOTA, LLC

**Current Principal Place of Business:**

**New Principal Place of Business:**

6289 TOWER LANE  
SARASOTA, FL 34240 US

**Current Mailing Address:**

**New Mailing Address:**

6289 TOWER LANE  
SARASOTA, FL 34240 US

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

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

OLSON, PAUL E  
1776 RINGLING BLVD.  
SARASOTA, FL 34236 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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGR ( ) Delete  
Name: CHAWKINS, NEIL E  
Address: 6289 TOWER LANE  
City-St-Zip: SARASOTA, FL 34240

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: NEIL E CHAWKINS MGR 02/16/2009

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