

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000123170

Entity Name: DR. REAL ESTATE, LLC

FILED
Feb 12, 2007
Secretary of State

Current Principal Place of Business:

3245 5TH AVENUE NORTH
SAINT PETERSBURG, FL 33713

New Principal Place of Business:

901 34TH AVENUE NORTH
76160
SAINT PETERSBURG, FL 33734

Current Mailing Address:

3245 5TH AVENUE NORTH
SAINT PETERSBURG, FL 33713

New Mailing Address:

POST OFFICE BOX 76160
SAINT PETERSBURG, FL 33734

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

Name and Address of Current Registered Agent:

JOSEPH C. WHITELOCK, PA
3245 5TH AVENUE NORTH
SAINT PETERSBURG, FL 33713 US

Name and Address of New Registered Agent:

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:

Title: MGR () Delete
Name: ATKINSON, JOEL
Address: 3245 5TH AVENUE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33713

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ATKINSON, JOEL
Address: POST OFFICE BOX 76160
City-St-Zip: SAINT PETERSBURG, FL 33734

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: JOEL ATKINSON

MGR

02/12/2007

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