2007 LIMITED LIABILITY COMPANY ANNUAL REPORT					FILED Apr 09, 2007 8:00 Secretary of Stat		
DOCUMENT # L06000003569 1. Entity Name RELIANCE RESIDENTIAL REALTY, LLC					04-09-2007 90346 016 ****50.00		
Principal Place of Business 1 SOUTH OCEAN BLVD. SUITE 308 BOCA RATON, FL 33432		Mailing Address 1 SOUTH OCEAN BLVD. SUITE 308 BOCA RATON, FL 33432			~~~3935		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02122007	Chg-LLC	CR2E083 (12/06)	)
City & State		City & State		4. FEI Numb	41179		Applie Not Ar
Zip	Country	Zip	Country		of Status Desired	S5.00 Ad Fee Require	ditio
	6. Name and Address of Curr	ent Registered Agent	Name	7. Name and	Address of New	Registered Agent	
		nt for the purpose of changing its	City registered office or regi	stered agent, or bo	oth, in the State of F	FL Zip Coo Porida. I am familiar with	
SIGNATURE .	Signeture, typed or printed name of registered a	igent and the if applicable. (NOT	E: Registered Agent signature req	uired when reinstating)	· · · · · · · · · · · · · · · · · · ·	DATE	
SIGNATURE . Fi	lling Fee is \$50.00 ue by May 1, 2007			uired when reinstating)	Florid	ke check payable to la Department of Sta	ite
SIGNATURE .	lling Fee is \$50.00 ue by May 1, 2007	MBERS / MANAGERS	E: Regissered Agent eignature req 10. TITLE NAME STREET ADDRESS CITY - ST - ZIP	uhed when reinstating)	Florid	ke check payable to	<u> </u>
SIGNATURE . FI D 9. TITLE NAME STREET ADDRESS	Iling Fee is \$50.00 we by May 1, 2007 MANAGING MEN MGR YONCE, KATHLEEN E 1 SOUTH OCEAN BLVD. SUI	MBERS / MANAGERS	10, Title Name Street address	uhed when reinstating)	Florid	ke check payable to la Department of Sta S/CHANGES	
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