

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000003940

Entity Name: FIVE STAR REALTY, LLC

FILED
Mar 22, 2007
Secretary of State

Current Principal Place of Business:

8981 FALCON POINTE LOOP
FORT MYERS, FL 33912

New Principal Place of Business:

Current Mailing Address:

8981 FALCON POINTE LOOP
FORT MYERS, FL 33912

New Mailing Address:

FEI Number: 20-4125890

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NIEDERMAIR, PETRA
8981 FALCON POINTE LOOP
FORT MYERS, FL 33912 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: MGRM () Delete
Name: NIEDERMAIR, PETRA
Address: 8981 FALCON POINTE LOOP
City-St-Zip: FORT MYERS, FL 33912

Title: MGRM () Delete
Name: AMBEL SOLUTIONS, INC, .
Address: 28000 SPANISH WELLS BLVD.
City-St-Zip: BONITA SPRINGS, FL 34135

Title: MGRM () Delete
Name: NIEDERMAIR, GUENTER
Address: 8981 FALCON POINTE LOOP
City-St-Zip: FORT MYERS, FL 33912

ADDITIONS/CHANGES:

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

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

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

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: PETRA NIEDERMAIR

MGRM

03/22/2007

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