
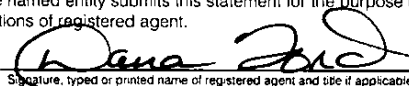
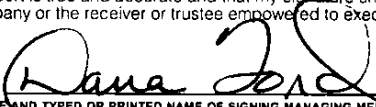


2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED

2007 MAR -1 AM 10:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L06000005647					
1. Entity Name IRBY REALTY GROUP LLC					
Principal Place of Business 9955 E. CO. HWY 30-A #409 PANAMA CITY BEACH, FL 32413			Mailing Address 41 THE GREENWAY LOOP PANAMA CITY BEACH, FL 32413		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address P.O. Box 611654			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		Rosemary Beach FL			
Zip	Country	Zip	Country	01052007 Chg-LLC CR2E083 (12/06)	
32461		US		4. FEI Number 20-4160140	
5. Certificate of Status Desired <input type="checkbox"/>				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
IRBY, DEBORAH E 41 THE GREENWAY LOOP PANAMA CITY BEACH, FL 32413			Name Dana FORD Street Address (P.O. Box Number is Not Acceptable) 9955 E. Co Hwy 30-A #409 PANAMA CITY BEACH FL 32413		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE  DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>					
Amended AR is \$50.00		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR IRBY, DEBORAH E 41 THE GREENWAY LOOP PANAMA CITY BEACH, FL 32413		<input checked="" type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIR ARNSDORFF III, HAROLD E 9955 EAST CO. HIGHWAY 30-A PANAMA CITY BEACH, FL 32413		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Estate of Deborah Irby P.O. Box 611654 Rosemary Beach FL 32461		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: 				Date 2/13/07 Daytime Phone # _____	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>					

