

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000014693

FILED
Jan 11, 2008
Secretary of State

Entity Name: NEW ORLANDO REAL ESTATE, LLC

Current Principal Place of Business:

5800 NORTH BANANA RIVER BOULEVARD
UNIT 137
CAPE CANAVERAL, FL 32920

New Principal Place of Business:

Current Mailing Address:

420 RIVERSIDE DRIVE
UNIT 6F
NEW YORK, NY 10025

New Mailing Address:

FEI Number: 86-1161237

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SMITH, RANDALL C ESQ
533 VERSAILLES DRIVE
SUITE 100
MAITLAND, FL 32751 US

Name and Address of New Registered Agent:

POMA, FRANK
10501 SOUTH ORANGE AVENUE
UNIT 122
ORLANDO, FL 32824 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: FRANK POMA

01/11/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: POMA, FRANK
Address: 5800 NORTH BANANA RIVER BOULEVARD
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: MGRM () Delete
Name: HERTZ, VICTOR J
Address: 420 RIVERSIDE DRIVE, UNIT 6F
City-St-Zip: NEW YORK, NY 10025

Title: MGRM () Delete
Name: FINGER, GAIL
Address: 420 RIVERSIDE DRIVE, UNIT 6F
City-St-Zip: NEW YORK, NY 10025

ADDITIONS/CHANGES:

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

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

Title: MGRM (X) Change () Addition
Name: FINGER, GAIL
Address: 420 RIVERSIDE DRIVE, UNIT 6F
City-St-Zip: NEW YORK, NY 10025

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: GAIL FINGER

MGR

01/11/2008

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