

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000014693

FILED
Jan 28, 2009
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:

POMA, FRANK
10501 SOUTH ORANGE AVENUE
UNIT 122
ORLANDO, FL 32824 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: 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: () Change () Addition
Name:
Address:
City-St-Zip:

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: FRANK POMA

VP

01/28/2009

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