

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000014804

FILED
Apr 28, 2008
Secretary of State

Entity Name: SCHLITT & ASSOCIATES REAL ESTATE, LLC

Current Principal Place of Business:

947 20TH PLACE
VERO BEACH, FL 32960

New Principal Place of Business:

1850 COBIA DRIVE
VERO BEACH, FL 32960

Current Mailing Address:

947 20TH PLACE
VERO BEACH, FL 32960

New Mailing Address:

PO BOX 643113
VERO BEACH, FL 32964

FEI Number: 20-4296303

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MALONE, CLINT S ESQ
979 BEACHLAND BOULEVARD
VERO BEACH, FL 32963 US

Name and Address of New Registered Agent:

GOULD, COOKSEY, FENNELL
979 BEACHLAND BOULEVARD
VERO BEACH, FL 32963 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: JENNIFER S. MALONE

04/28/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SCHLITT, JOSEPH P
Address: 947 20TH PLACE
City-St-Zip: VERO BEACH, FL 32960

Title: MGR () Delete
Name: SCHLITT, KIMBERLY A
Address: 947 20TH PLACE
City-St-Zip: VERO BEACH, FL 32960

Title: MGR () Delete
Name: MALONE, JENNIFER S
Address: 947 20TH PLACE
City-St-Zip: VERO BEACH, FL 32960

Title: MGR () Delete
Name: SCHLITT, NATALIE L
Address: 947 20TH PLACE
City-St-Zip: VERO BEACH, FL 32960

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SCHLITT, JOSEPH P
Address: 866 41ST COURT
City-St-Zip: VERO BEACH, FL 32960

Title: MGR (X) Change () Addition
Name: SCHLITT, KIMBERLY A
Address: 1401 S BAY VILLA PLACE, B
City-St-Zip: TAMPA, FL 33629

Title: MGR (X) Change () Addition
Name: MALONE, JENNIFER S
Address: PO BOX 643113
City-St-Zip: VERO BEACH, FL 32964

Title: MGR (X) Change () Addition
Name: SCHLITT, NATALIE L
Address: 26 SAILFISH ROAD
City-St-Zip: VERO BEACH, FL 32960

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: JENNIFER S. MALONE

MGR

04/28/2008

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