

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000014804

FILED  
Apr 19, 2009  
Secretary of State

**Entity Name:** SCHLITT & ASSOCIATES REAL ESTATE, LLC

**Current Principal Place of Business:**

1850 COBIA DRIVE  
VERO BEACH, FL 32960

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 643113  
VERO BEACH, FL 32964

**New Mailing Address:**

**FEI Number:** 20-4296303

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GOULD, COOKSEY, FENNELL  
979 BEACHLAND BOULEVARD  
VERO BEACH, FL 32963 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: SCHLITT, JOSEPH P  
Address: 866 41ST COURT  
City-St-Zip: VERO BEACH, FL 32960

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

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

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

**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:

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:** JENNIFER S. MALONE

MGR

04/19/2009

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