2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000017721

Entity Name: WHALEHEAD REAL ESTATE DEVELOPMENT, L.L.C.

FILED Jan 20, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

66 NORTH ATLANTIC AVENUE, SUITE 205 905 LIVE OAK ROAD COCOA BEACH, FL 32931 VERO BEACH, FL 32963

Current Mailing Address: New Mailing Address:

C/O SAMUEL A. BLOCK, P.A.

3339 CARDINAL DRIVE, SUITE 200

VERO BEACH, FL 32963

C/O SAMUEL A. BLOCK, P.A.
21 ROYAL PALM POINTE, SUITE 100

VERO BEACH, FL 32960

FEI Number: 20-4530308 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

BLOCK, SAMUEL A ESQ
3339 CARDINAL DRIVE, SUITE 200
VERO BEACH, FL 32963 US
FAIRES, JUSTIN S ESQ
905 LIVE OAK ROAD
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: JUSTIN S. FAIRES 01/20/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 FAIRES, JUSTÍN S
 Name:
 FAIRES, JUSTÍN S

 Address:
 66 NORTH ATLANTIC AVENUE, SUITE 205
 Address:
 905 LIVE OAK ROAD

 City-St-Zip:
 COCOA BEACH, FL 32931
 City-St-Zip:
 VERO BEACH, FL 32963

I hereby certify that the information supplied with this filing does not qualify for the 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: JUSTIN S. FAIRES MGR 01/20/2007