

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000028086

FILED
Jul 04, 2007
Secretary of State

Entity Name: XS HOLDINGS FLORIDA REALTY, LLC

Current Principal Place of Business:

132 SAND DOLLAR LANE
SARASOTA, FL 34242

New Principal Place of Business:

Current Mailing Address:

132 SAND DOLLAR LANE
SARASOTA, FL 34242

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

MOTOSKO, JANE
132 SAND DOLLAR LANE
SARASOTA, FL 34242 US

Name and Address of New Registered Agent:

MOTOSKO, STEPHEN
132 SAND DOLLAR LANE
SARASOTA, FL 34242 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: STEPHEN MOTOSKO

07/04/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MOTOSKO, JANE
Address: 132 SAND DOLLAR LANE
City-St-Zip: SARASOTA, FL 34242

Title: MGRM (X) Delete
Name: MOTOSKO, STEPHEN
Address: 132 SAND DOLLAR LANE
City-St-Zip: SARASOTA, FL 34242

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MOTOSKO, STEPHEN
Address: 132 SAND DOLLAR LANE
City-St-Zip: SARASOTA, FL 34242 US

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: STEPHEN MOTOSKO

MGRM

07/04/2007

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