

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000030404

FILED
Apr 07, 2007
Secretary of State

Entity Name: INDEPENDENT REAL ESTATE CONSULTING,LLC

Current Principal Place of Business:

4140 ENCLAVE PLACE
CHARLOTTE HARBOR, FL 33980 US

New Principal Place of Business:

Current Mailing Address:

4140 ENCLAVE PLACE
CHARLOTTE HARBOR, FL 33980 US

New Mailing Address:

FEI Number: 20-4784069

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
1111 LINCOLN RD
SUITE 400
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

GOLDSTEIN, DAVID B
23462 PATERA AVENUE
PORT CHARLOTTE, FL 33980 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: DAVID B. GOLDSTEIN

04/07/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HANSEN, JORN
Address: 4140 ENCLAVE PLACE
City-St-Zip: CHARLOTTE HARBOR, FL CHARLOTTE US

Title: MGRM () Delete
Name: KISLING, BARBARA
Address: 4140 ENCLAVE PLACE
City-St-Zip: CHARLOTTE HARBOR, FL CHARLOTTE US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: KISLING, BARBARA
Address: 13355 COPPER AVENUE
City-St-Zip: PORT CHARLOTTE, FL 33981 US

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: JORN HANSEN

MGRM

04/07/2007

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