

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Mar 12, 2007 8:00 am
Secretary of State

02-15-2007 90274 008 ****50.00

DOCUMENT # L06000034731 1. Entity Name NEO REAL ESTATE HOLDINGS, L.L.C.					
Principal Place of Business 3745 11th Circle, Ste 105 Vero Beach, FL 32960			Mailing Address 3745 11th Circle, Ste 105 Vero Beach, FL 32960		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip Country		City & State Zip Country		4. FEL Number 562574249	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required		Applied For ☐ Not Applicable			
6. Name and Address of Current Registered Agent DEC CONSULTANTS, INC. 1515 INDIAN RIVER BOULEVARD, SUITE A 210 VERO BEACH, FL 32960-7103			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when renewing) _____ DATE _____					
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM JANET ELLEN ANDERSON 3745 11th Circle, Ste 105 Vero Beach, FL 32960 ☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM JANET ELLEN ANDERSON TRUST 105 CACHE CAY DRIVE VERO BEACH, FL 329831213 ☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: <u><i>Janet A</i></u>			Date: <u>2/13/07</u> <u>772 744 7741</u>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					