

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000036776

**FILED**  
**Apr 30, 2007**  
**Secretary of State**

**Entity Name:** REAL ESTATE PROBLEM SOLVERS, LLC

**Current Principal Place of Business:**

3143 GIDEON ST.  
NORTH PORT, FL 34288

**New Principal Place of Business:**

**Current Mailing Address:**

3143 GIDEON ST.  
NORTH PORT, FL 34288 US

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired (X)**

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

WATSON, DARRYL E  
3143 GIDEON ST.  
NORTH PORT, FL 34288 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: MGR ( ) Delete  
Name: WATSON, DARRYL E  
Address: 3143 GIDEON ST.  
City-St-Zip: NORTH PORT, FL 34288 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: WATSON, DARRYL E  
Address: 3143 GIDEON ST.  
City-St-Zip: NORTH PORT, FL 34288 US

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: DARRYL E. WATSON

MGRM

04/30/2007

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