

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000037533

Entity Name: REAL VEST CAPITAL, LLC

FILED
Mar 04, 2008
Secretary of State

Current Principal Place of Business:

1701 PARK CENTER DRIVE
ORLANDO, FL 32835

New Principal Place of Business:

7706 BARDMOOR HILL CIRCLE
ORLANDO, FL 32835 US

Current Mailing Address:

1701 PARK CENTER DRIVE
ORLANDO, FL 32835

New Mailing Address:

7706 BARDMOOR HILL CIRCLE
ORLANDO, FL 32835 US

FEI Number: 20-4687073

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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: SEEBACH, JOSEPH
Address: 1701 PARK CENTER DRIVE
City-St-Zip: ORLANDO, FL 32835

Title: MGR () Delete
Name: GILLEN, JEAN WECLEW
Address: 1701 PARK CENTER DRIVE
City-St-Zip: ORLANDO, FL 32835

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SEEBACH, JOSEPH
Address: 7706 BARDMOOR HILL CIRCLE
City-St-Zip: ORLANDO, FL 32835 US

Title: MGR (X) Change () Addition
Name: GILLEN, JEAN WECLEW
Address: 7706 BARDMOOR HILL CIRCLE
City-St-Zip: ORLANDO, FL 32835 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: JOSEPH SEEBACH

MGR

03/04/2008

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