## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**DOCUMENT # L06000045273** 

1. Entity Name REALTY DEL SOL, LLC



FILED May 02, 2008 08:00 AN Secretary of State

Principal Place of Business

**SIGNATURE** 

684 CRYSTAL DRIVE Palm Harbor, Fl 34684 Mailing Address

P.O. BOX 2367

PALM HARBOR, FL 34682



DO NOT WRITE IN THIS SPACE

04292008 No Chg-LLC CR2E083 (12/07)

4.	FEI Number		Applied For
	20-4787283		Not Applicable
5.	Certificate of Status Desired	\$5.00 Fee Re	Additional guired

6. Name and Address of Current Registered Agent

RUCH, CHRISTOPHER E 36750 US HIGHWAY 19 NORTH, #2397 PALM HARBOR, FL 34684

## DO NOT WRITE IN THIS SPACE

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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 legistered agent.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE						
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75						
9.	MANAGING MEMBERS/MANAGERS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RUCH, CHRISTOPHER E 36750 US HIGHWAY 19 NORTH, #2397 PALM HARBOR, FL 34684					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		U00000943945 05/29/08-80081-001 138.75				
TITLE NAME STREET ADDRESS CITY-S1-ZIP		DO NOT WRITE				
TITLE RAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·····································					
TITLE . NAME STREET ADDRESS CETY-ST-ZIP						
11. I hereby certify that/the information supplied with this filling 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 level effect as if made under onth; that I am a managing member or manager of the						

vered to execute this report as required by Chapter 608, Florida Statutes.