

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 16, 2007 8:00 am
Secretary of State

07-16-2007 90040 016 ****50.00

DOCUMENT # L06000063339 1. Entity Name OCEANSIDE REALTY, LLC					
Principal Place of Business 2975 BOBCAT VILLAGE CNTR RD STE 100 NORTH PORT, FL 34288			Mailing Address 2975 BOBCAT VILLAGE CNTR RD STE 100 NORTH PORT, FL 34288		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		 06192007 Chg-LLC CR2E083 (12/06)	
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number 20-5077050				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent POOR, TONI 2975 BOBCAT VILLAGE CNTR RD STE 100 NORTH PORT, FL 34288				7. Name and Address of New Registered Agent Name RICHARD ERDMANN Street Address (P.O. Box Number is Not Acceptable) 1505 KENMORE ST. City PORT CHARLOTTE FL Zip Code 33952-2532	
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 <u><i>Richard Erdmann</i></u> (NOTE: Registered Agent signature required when re-registering) DATE _____					
Filing Fee is \$50.00 Due by September 14, 2007		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PERRAULT, RICHARD 1302 DELMONTE ST. NORTH PORT, FL 34288	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RICHARD ERDMANN 2975 BOBCAT VILLAGE CTR. RD - #100 NORTH PORT FL 34288
<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<input type="checkbox"/> Change <input type="checkbox"/> Addition		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<input type="checkbox"/> Change <input type="checkbox"/> Addition		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<input type="checkbox"/> Change <input type="checkbox"/> Addition		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<input type="checkbox"/> Change <input type="checkbox"/> Addition		<input type="checkbox"/> Change <input type="checkbox"/> 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 or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE <u><i>Monica Kratochvil</i></u> Date <u><i>July 5, 2007</i></u> 941-223-1510					