

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000063938

FILED  
May 02, 2007  
Secretary of State

**Entity Name:** ANDREWS REAL ESTATE VENTURES, L.L.C.

**Current Principal Place of Business:**

133 HERMOSA STREET  
LADY LAKE, FL 32159 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 491271  
LEESBURG, FL 34749 US

**New Mailing Address:**

FEI Number: 20-5133886      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

ANDREWS, DANIEL M  
33640 OVERTON DRIVE  
LEESBURG, FL 34788 US

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: MGRM ( ) Delete  
Name: ANDREWS, DANIEL M  
Address: 33640 OVERTON DRIVE  
City-St-Zip: LEESBURG, FL 34788 US

Title: MGRM ( ) Delete  
Name: ANDREWS, WILLIAM A  
Address: 1013 S.E. 14TH AVENUE  
City-St-Zip: OCALA, FL 34471 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: DANIEL M ANDREWS

MGRM

05/02/2007

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