

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000064740

Entity Name: SASIL 1, LLC

FILED
Apr 12, 2007
Secretary of State

Current Principal Place of Business:

802 2ND STREET NORTH STE A
SAFETY HARBOR, FL 34695

New Principal Place of Business:

8308 NEW YORK AVE
HUDSON, FL 34667

Current Mailing Address:

802 2ND STREET NORTH STE A
SAFETY HARBOR, FL 34695

New Mailing Address:

8308 NEW YORK AVE
HUDSON, FL 34667

FEI Number: 20-5112207

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHEFMAN, DAVID B
802 2ND STREET NORTH STE A
SAFETY HARBOR, FL 34695 US

Name and Address of New Registered Agent:

DAVIS, DAVID L
8308 NEW YORK AVE
HUDSON, FL 34667 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: DAVID L DAVIS

04/12/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: REAL ESTATE EXCHANGE, SERVICES, INC .
Address: 802 2ND STREET NORTH STE A
City-St-Zip: SAFETY HARBOR, FL 34695

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: DAVIS, DAVID L
Address: 8308 NEW YORK AVE
City-St-Zip: HUDSON, FL 34667

Title: MGR () Change (X) Addition
Name: DAVIS, NORMA S
Address: 8308 NEW YORK AVE
City-St-Zip: HUDSON, FL 34667

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID L DAVIS

MGR

04/12/2007

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