

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000070029

Entity Name: E-XELLENT REALTY LLC

FILED
May 19, 2008
Secretary of State

Current Principal Place of Business:

7824 EMERALD CIRCLE
SUITE 104
NAPLES, FL 34109 US

New Principal Place of Business:

Current Mailing Address:

7824 EMERALD CIRCLE
SUITE 104
NAPLES, FL 34109 US

New Mailing Address:

FEI Number: 20-5159824 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

RAHMAN, NEAL
3219 CORAL RDIGE DRIVE
CORAL SPRINGS, FL 33065 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: NUNEZ, JUAN A
Address: 11104 PALMETTO RIDGE
City-St-Zip: NAPLES, FL 34110 US

Title: MGRM () Delete
Name: NUNEZ, GRACE
Address: 11104 PALMETTO RIDGE
City-St-Zip: NAPLES, FL 34110 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: NUNEZ, JUAN A
Address: 7824 EMERALD CIR #104
City-St-Zip: NAPLES, FL 34109 US

Title: MGRM (X) Change () Addition
Name: NUNEZ, GRACE
Address: 7824 EMERALD CIR #104
City-St-Zip: NAPLES, FL 34109 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: JUAN A NUNEZ

MGM

05/19/2008

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