

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000072126

FILED  
Jan 15, 2009  
Secretary of State

Entity Name: SABLE REALTY INVESTMENTS, LLC

## Current Principal Place of Business:

345 BAYSHORE BLVD., #6  
TAMPA, FL 33600

## New Principal Place of Business:

4201 BAYSHORE BLVD #1502  
TAMPA, FL 33611

## Current Mailing Address:

345 BAYSHORE BLVD., #6  
TAMPA, FL 33600

## New Mailing Address:

4201 BAYSHORE BLVD #1502  
TAMPA, FL 33611

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

## Name and Address of Current Registered Agent:

SABLE, DAVID B  
345 BAYSHORE BLVD., #6  
TAMPA, FL 33600 US

## Name and Address of New Registered Agent:

SABLE, DAVID B  
4201 BAYSHORE BLVD #1502  
TAMPA, FL 33611 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 SABLE

01/15/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: SABLE, DAVID B  
Address: 345 BAYSHORE BLVD., #6  
City-St-Zip: TAMPA, FL 33600

Title: MGRM ( ) Delete  
Name: SABLE, JENNIFER  
Address: 1276 N. WAYNE ST. #509  
City-St-Zip: ARLINGTON, VA 22201

Title: MGRM ( ) Delete  
Name: SABLE, JOSHUA M  
Address: 2656 VETERAN AVENUE  
City-St-Zip: LOS ANGELES, CA 90064

## ADDITIONS/CHANGES:

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

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: DAVID SABLE

MGRM

01/15/2009

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