

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT (AR) - DUE BY MAY 1, 2008**

FILED
Feb 14, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000092609			
1. Entity Name WHITE REAL ESTATE MANAGEMENT LLC			
Principal Place of Business 17405 SW 267 LANE HOMESTEAD FL 33031		Mailing Address 17405 SW 267 LANE HOMESTEAD FL 33031	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
		4. FEI Number 20-5591363 Applied For ☐ Not Applicable ☒	
		5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
HALPEN, DAVID M 249 ROYAL PALM WAY, SUITE 501 DUNWODY WHITE & LANDON, P.A. PALM BEACH FL 33480		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ (NOTE: Registered Agent's signature is required when reappointing) Signature, typed or printed name of registered agent and title, if applicable _____ DATE _____			
FILE NOW!!! FEE IS \$138.75 After May 1, 2008, Fee Will Be \$538.75 Make Check Payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WHITE, WANETA M 17405 SW 267 LANE HOMESTEAD FL 33031 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition U000000827983 02/22/08-80012-008 138.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WHITE, SUE 17405 SW 267 LANE HOMESTEAD FL 33031 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Waneta White*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

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