2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000093229

Entity Name: GALILEO REAL ESTATE HOLDINGS, LLC

Current Principal Place of Business:	**New Principal Place of Business:**
1840 MEASE DR. SUITE 319 SAFETY HARBOR, FL 34695	

Current Mailing Address:	**New Mailing Address:**
1840 MEASE DR. SUITE 319 SAFETY HARBOR, FL 34695	

FEI Number: 42-1713101   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
LAARTZ, BRENT W 1501 S. PINELLAS AVE B TARPON SPRINGS, FL 34689 US	LAARTZ, BRENT W 1840 MEASE DRIVE 319 SAFETY HARBOR, FL 34695 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: BRENT W. LAARTZ   01/14/2008
_____
                Electronic Signature of Registered Agent   Date

MANAGING MEMBERS/MANAGERS: **ADDITIONS/CHANGES:**

Title:	MGR ( ) Delete	Title:	MGR (X) Change ( ) Addition
Name:	LAARTZ, BRENT W	Name:	LAARTZ, BRENT W
Address:	1501 S. PINELLAS AVE, STE B	Address:	1840 MEASE DRIVE, STE 319
City-St-Zip:	TARPON SPRINGS, FL 34689	City-St-Zip:	SAFETY HARBOR, FL 34695
Title:	MGR ( ) Delete	Title:	MGR (X) Change ( ) Addition
Name:	GROOM, TODD M	Name:	GROOM, TODD M
Address:	1501 S. PINELLAS AVE, STE B	Address:	1840 MEASE DRIVE, STE 319
City-St-Zip:	TARPON SPRINGS, FL 34689	City-St-Zip:	SAFETY HARBOR, FL 34695

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: BRENT W. LAARTZ   PRES   01/14/2008
_____
        Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date