

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000104716

FILED
Jan 11, 2008
Secretary of State

Entity Name: RENTVESTOR LIMITED LIABILITY COMPANY

Current Principal Place of Business:

12809 CANTON AVE
HUDSON, FL 34669

New Principal Place of Business:

Current Mailing Address:

12809 CANTON AVE
HUDSON, FL 34669

New Mailing Address:

FEI Number: 83-0472831

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAGANO, CHRISTY A
12809 CANTON AVE
HUDSON, FL 34669 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: MGRM () Delete
Name: PAGANO, DAVID
Address: 12809 CANTON AVE
City-St-Zip: HUDSON, FL 34669

Title: MGRM () Delete
Name: PAGANO, CHRISTY
Address: 12809 CANTON AVE
City-St-Zip: HUDSON, FL 34669

Title: MGRM () Delete
Name: YORK, ADAM
Address: 1885 PRINCETON DR
City-St-Zip: CLEARWATER, FL 33765

Title: MGRM () Delete
Name: YORK, LISA
Address: 1885 PRINCETON DR
City-St-Zip: CLEARWATER, FL 33765

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:

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: CHRISTY A PAGANO

MGRM

01/11/2008

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