2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Feb 19, 2008 08:00 AM Secretary of State

	ANNUAL	REPURI			G =4 = CG4
DOCUMENT # L06000113323					Secretary of Sta
1. Entity Name SELF SELL REALTY LLC					
022, 02					•
Principal Plac	e of Business	Mailing Address			
8497 SUMN		8497 SUMNER AVE			
FT MYERS; F	L 33908	FT MYERS, FL 33908			. '
	:		<u>.</u>		
	a de la companya de l	a de la companya de La companya de la co	•n. *		
	O NOT WRITE	IN THE COA	ČE .	02152008No Chg-LLC	CR2E083 (12/07)
Ļ	O NOI WRITE	IN THIS SPA	CE TO	4. FEI Number 56-2626169	Applied For
		The state of the second		5. Certificate of Status Desired	Not Applicable \$5.00 Additional
	6. Name and Address of Current R	egistered Agent	to programa	5. Certificate of Status Desired	Fee Required
		Sheralag vBallt		om en	· · · · · · · · · · · · · · · · · · ·
	GREGORY L INER AVE		3.	DO NOT W	RITE
FT MYER	S, FL 33908			IN THIS SE	PACE
			e e		Ar. The second
8. The above	named entity submits this statement for t	ne purpose of changing its register	red office or register	ed agent, or both, in the State of Flo	orida. I am (amiliar with, and accept
	tions of registered agent.	, , , , , , , , , , , , , , , , , , , ,	· ·	• , .	. ,
SIGNATURE.	Signature, typed or printed name of registered agent and	title if applicable. (NOTE: Register	ed Agent signature required	when reinstating)	DATE
FILE	NOWIII FEE IS \$138.75				
	y 1, 2008 Fee will be \$538.75			0000 027270	:00831547 :8-80024-018 138 75
9.	MANAGING MEMBER	S/MANAGERS	3 7,30	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 -
TITLE NAME	MGRM WRIGHT, GREGORY L				, `
STREET ADDRESS	8497 SUMNER AVE			and the same of th	
CITY-ST-ZIP	FT MYERS, FL 33908		Shore Market Market		
NAME		•		Compared to the second of the	
STREET ADDRESS CITY-ST-ZIP				A Section 18	at Total
InTLE					
NAME STREET ADDRESS				。 (1)	<u>Chara </u>
CITY-ST-ZIP			ar field for	DO NOT W	RITE
TITLE NAME				IN THIS SF	PACE
STREET ADDRESS			\$ 100 miles	The state of the s	in the second of
C)TY-ST-ZIP					
TITLE NAME					
STREET ADDRESS					
CITY-ST-ZIP					
NAME				الله المراجع ا	

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is true and accreate 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 preferediver of trustee empowered to execute this report as required by Chapter 608. Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR P

STREET ADDRESS CITY-ST-ZIP

GREGORY L. WRIGHT

2-15-08

239) 443-9600

Dayters