

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L07000058452

Entity Name: 4AVILLA REALTY, LLC

FILED
Aug 05, 2008
Secretary of State

Current Principal Place of Business:

5770 W IRLO BRONSON MEMORIAL HWY
422
KISSIMMEE, FL 34746

New Principal Place of Business:

Current Mailing Address:

5770 W IRLO BRONSON MEMORIAL HWY
422
KISSIMMEE, FL 34746

New Mailing Address:

FEI Number: 26-0289443

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC
2731 EXECUTIVE PARK DRIVE
4
WESTON, FL 33331 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: R&R CANADA, INC.,
Address: 5770 W IRLO BRONSON MEMORIAL HWY, STE 422
City-St-Zip: KISSIMMEE, FL 34746

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: P () Change (X) Addition
Name: WILKES, RICHARD
Address: 2822 COMMERCE PARK DRIVE, SUITE 400
City-St-Zip: ORLANDO, FL 32819 US

Title: VST () Change (X) Addition
Name: CHRISTNER, RUSSEL W JR.
Address: 2822 COMMERCE PARK DRIVE, SUITE 400
City-St-Zip: ORLANDO, FL 32819 US

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: R&R CANADA, INC.

MGRM

08/05/2008

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