

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000069947

FILED
Apr 17, 2009
Secretary of State

Entity Name: CDS REALTY, LLC

Current Principal Place of Business:

3299 NW 2ND AVE SUITE 101
BOCA RATON, FL 33431 US

New Principal Place of Business:

Current Mailing Address:

3299 NW 2ND AVE SUITE 101
BOCA RATON, FL 33431 US

New Mailing Address:

FEI Number: 26-0490395

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILMOE, WILLIAM H
3299 NW 2ND AVE
BOCA RATON, FL 33431 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: MGR () Delete
Name: CDS GROUP HOLDINGS, LLC
Address: 95 NE 4TH AVENUE
City-St-Zip: DELRAY BEACH, FL 33483 US

Title: MGR () Delete
Name: MILMOE, WILLIAM
Address: 3299 NW 2ND AVE
City-St-Zip: BOCA RATON, FL 33431 US

Title: MGR () Delete
Name: MCDONALD, MERVIN
Address: 3299 NW SECOND AVE SUITE 101
City-St-Zip: BOCA RATON, FL 33431

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: CDS GROUP HOLDINGS, LLC
Address: 3299 NW 2ND AVE
City-St-Zip: BOCA RATON, FL 33431 US

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: WILLIAM H MILMOE

MGR

04/17/2009

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