

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000097779

FILED  
Apr 27, 2008  
Secretary of State

Entity Name: FREEPORT REALTY SERVICES, LLC

**Current Principal Place of Business:**

100 CEDAR PLACE  
FREEPORT, FL 32439

**New Principal Place of Business:**

**Current Mailing Address:**

100 CEDAR PLACE  
FREEPORT, FL 32439

**New Mailing Address:**

FEI Number: 26-1207704

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RYAN GARRITY & ASSOCIATES, P.A.  
29 CAPRI COURT  
FREEPORT, FL 32439 US

**Name and Address of New Registered Agent:**

CHAMBERLAIN, STEVEN A MGRM  
100 CEDAR PLACE  
FREEPORT, FL 32439 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: STEVEN A. CHAMBERLAIN

04/27/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: CHAMBERLAIN, STEVE A  
Address: 100 CEDAR PLACE  
City-St-Zip: FREEPORT, FL 32439

Title: MGR (X) Delete  
Name: HINNERS, LOIS A  
Address: 100 CEDAR PLACE  
City-St-Zip: FREEPORT, FL 32439

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: CHAMBERLAIN, STEVEN A  
Address: 100 CEDAR PLACE  
City-St-Zip: FREEPORT, FL 32439

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: STEVEN A. CHAMBERLAIN

MGRM

04/27/2008

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