2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000101084

City-St-Zip:

Entity Name: FLORIDA FIFTH REALTY, LLC

FILED Apr 10, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1044 CLUBHOUSE BLVD NEW SMYRNA BEACH, FL 32168 **Current Mailing Address: New Mailing Address:** 1044 CLUBHOUSE BLVD NEW SMYRNA BEACH, FL 32168 FEI Number: 42-1748507 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CATARINELLA, ROLAND S 1044 CLUBHOÚSE BLVD NEW SMYRNA BEACH, FL 32168 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Delete (X) Change () Addition CATARINELLA, ROLAND S CATARINELLA, ROLAND S MGRM Name: Name: 1044 CLUBHOUSE BLVD Address: 1044 CLUBHOUSE BLVD Address: City-St-Zip: NEW SMYRNA BEACH, FL 32168 City-St-Zip: NEW SMYRNA BEACH, FL 32168 Title: MGRM () Delete Title: (X) Change () Addition CATARINELLA, DOROTHY A Name: CATARINELLA, DOROTHY A MGRM Name: Address: 1044 CLUBHOUSE BLVD Address: 1044 CLUBHOUSE BLVD City-St-Zip: NEW SMYRNA BEACH, FL 32168 City-St-Zip: NEW SMYRNA BEACH, FL 32168 Title: () Delete Title: MGRM () Change (X) Addition CATARINELLA, STEPHEN A MGRM Name: Name: Address: Address: 104M BRIARIDGE DRIVE City-St-Zip: City-St-Zip: TURTLE CREEK,, PA 15145 Title: () Delete Title: MGRM () Change (X) Addition Name: Name: WINCKO, ANTHONY M MGRM Address: Address: 2901 N DALE MABRY HWY APT 309 City-St-Zip: City-St-Zip: TAMPA, FL 33607 Title: () Delete Title: MGRM () Change (X) Addition CATARINELLA, NANETTE R MGRM Name: Name: 402 FOREST RIDGE DRIVE Address: Address:

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.

City-St-Zip:

PITTSBURGH, PA 15221

SIGNATURE: ROLAND S. CATARINELLA MGRM 04/10/2009