

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000108394

FILED  
Jan 27, 2009  
Secretary of State

**Entity Name:** MIDFLORIDA REAL ESTATE SALES, L.L.C.

**Current Principal Place of Business:**

3008 SOUTH FLORIDA AVENUE  
LAKELAND, FL 33803

**New Principal Place of Business:**

**Current Mailing Address:**

3008 SOUTH FLORIDA AVENUE  
LAKELAND, FL 33803

**New Mailing Address:**

**FEI Number:** 26-1481756

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GIBSON, SANDRA  
3008 SOUTH FLORIDA AVENUE  
LAKELAND, FL 33803 US

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

HERNANDEZ, ANDRES  
3008 SOUTH FLORIDA AVENUE  
LAKELAND, FL 33803 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: A. (ANDY) HERNANDEZ

01/27/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: HERNANDEZ, ANDRES  
Address: 2510 SOUTH FLORIDA AVENUE  
City-St-Zip: LAKELAND, FL 33803

Title: P ( ) Delete  
Name: HERNANDEZ, ANDRES  
Address: 2510 SOUTH FLORIDA AVENUE  
City-St-Zip: LAKELAND, FL 33803

**ADDITIONS/CHANGES:**

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: A. (ANDY) HERNANDEZ

P

01/27/2009

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