2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000118700

Entity Name: RETURN THE DEED, LLC

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

13401-9, SUMMERLIN ROAD 6309 CORPORATE CT. SUITE 131 SUITE 115

FORT MYERS, FL 33919 FORT MYERS, FL 33919

Current Mailing Address: New Mailing Address:

13401-9, SUMMERLIN ROAD 6309 CORPORATE CT.
SUITE 131 SUITE 115
FORT MYERS, FL 33919 FORT MYERS, FL 33919

FEI Number: 26-1538074 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MANN, MILO

13401-9 SUMMERLIN ROAD

SUITE 131

FORT MYERS, FL 33919 US

THOMPSON, CHRISTOPER
6309 CORPORATE CT.
SUITE 115
FORT MYERS, FL 33919 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: CHRISTOPER THOMPSON

HRISTOPER THOMPSON 04/30/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition

Name:MANN, MILOName:THOMPSON, CHRISTOPERAddress:13401-9 SUMMERLIN ROAD, SUITE 131Address:6309 CORPORATE CT.City-St-Zip:FORT MYERS, FL 33909City-St-Zip:FORT MYERS, FL 33919

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: CHRISTOPER THOMPSON MGR 04/30/2009