

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000016847

FILED
Apr 29, 2009
Secretary of State

Entity Name: YORK REALTY, LLC

Current Principal Place of Business:

1930 PARK MEADOWS SUITE #6
FORT MYERS, FL 33907 US

New Principal Place of Business:

5322 MAJESTIC CT
CAPE CORAL, FL 33904 US

Current Mailing Address:

1930 PARK MEADOWS SUITE #6
FORT MYERS, FL 33907 US

New Mailing Address:

5322 MAJESTIC CT
CAPE CORAL, FL 33904 US

FEI Number: 26-1968403

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TROIANO, JOSEPH A ESQ.
12800 UNIVERSITY DRIVE, SUITE 380
FORT MYERS, FL 33907 US

Name and Address of New Registered Agent:

SOMMER, SHAWN K
5322 MAJESTIC CT
CAPE CORAL, FL 33904 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: SHAWN SOMMER

04/29/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SOMMER, SHAWN
Address: 1930 PARK MEADOWS STE 6
City-St-Zip: FORT MYERS, FL 33907 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SOMMER, SHAWN
Address: 5322 MAJESTIC CT
City-St-Zip: CAPE CORAL, FL 33904 US

Title: MGRM () Change (X) Addition
Name: PURDY, GLENN
Address: 5322 MAJESTIC CT
City-St-Zip: CAPE CORAL, FL 33904

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: SHAWN SOMMER

MGRM

04/29/2009

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