2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000034709

Entity Name: VANGUARD REALTY SOLUTIONS, LLC

FILED Mar 23, 2009 Secretary of State

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

648 DARTFORD CT 648 DARTFORD CT DEBARRY, FL 32713 DEBARY, FL 32713

Current Mailing Address: New Mailing Address:

2578 ENTERPRISE RD STE 166 ORANGE CITY, FL 32763

FEI Number: 26-2422729 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:

MATHON, ISABELLE
648 DARTFORD CT
DEBARRY, FL 32713 US

MATHON, ISABELLE
648 DARTFORD CT
DEBARY, FL 32713 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: 03/23/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

 Name:
 MATON, ISABELLE
 Name:
 MATHON, ISABELLE

 Address:
 648 DARTFORD CT
 Address:
 648 DARTFORD CT

 City-St-Zip:
 DEBARRY, FL 32713
 City-St-Zip:
 DEBARY, FL 32713

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: CLEOPHAT, PATRICK Name: CLEOPHAT, PATRICK

Name:CLEOPHAT, PATRICKName:CLEOPHAT, PATRICKAddress:648 DARTFORD CTAddress:648 DARTFORD CTCity-St-Zip:DEBARRY, FL 32713City-St-Zip:DEBARY, FL 32713

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: ISABELLE MATHON MGR 03/23/2009