2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000091054

Name:

Entity Name: STRASBERG REALTY, L.L.C.

FILED Apr 13, 2009 Secretary of State

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

195 S. WESTMONTE DR. 1039 HARLEY STRICKLAND BLVD

SUITE 1122 700

ALTAMONTE SPRINGS, FL 32714 US ORANGE CITY, FL 32763

Current Mailing Address: New Mailing Address:

195 S. WESTMONTE DR. 1039 HARLEY STRICKLAND BLVD **SUITE 1122**

ALTAMONTE SPRINGS, FL 32714 US ORANGE CITY, FL 32763 US

FEI Number: 26-3438365 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:

STRASBERG, LESLIE S STRASBERG, LESLIE S 195 S. WESTMONTE DR. 1039 HARLEY STRICKLAND BLVD **SUITE 1122**

ALTAMONTE SPRINGS, FL 32714 US ORANGE CITY, FL 32763 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: 04/13/2009

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

STRASBERG, LESLIE S STRASBERG, LESLIE S Address: 195 S. WESTMONTE DR., SUITE 1122 Address: 1039 HARLEY STRICKLAND BLVD SUITE 700

Name:

City-St-Zip: ALTAMONTE SPRINGS, FL 32714 City-St-Zip: ORANGE CITY, FL 32763 US

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: LESLIE S STRASBERG **MGRM** 04/13/2009