2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000094754

Entity Name: WILLIAMSON AND RYAN REALTY, LLC

Current Principal Place of Business:	**New Principal Place of Business:**
15886 SANTUARY DRIVE TAMPA, FL 33647	15886 SANCTUARY DRIVE TAMPA, FL 33647

Current Mailing Address:	**New Mailing Address:**
15886 SANTUARY DRIVE TAMPA, FL 33647	15886 SANCTUARY DRIVE TAMPA, FL 33647

FEI Number: 26-3459444   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:**
WILLIAMSON, WARREN 15886 SANTUARY DRIVE TAMPA, FL 33647 US	WILLIAMSON, WARREN G 15886 SANCTUARY DRIVE TAMPA, FL 33647 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: WARREN WILLIAMSON   01/10/2009

            Electronic Signature of Registered Agent   Date

MANAGING MEMBERS/MANAGERS:	**ADDITIONS/CHANGES:**
Title: MGRM ( ) Delete Name: WILLIAMSON, WARREN Address: 15886 SANTUARY DRIVE City-St-Zip: TAMPA, FL 33647	Title: MGRM (X) Change ( ) Addition Name: WILLIAMSON, WARREN G Address: 15886 SANCTUARY DRIVE City-St-Zip: TAMPA, FL 33647
Title: MGRM ( ) Delete Name: RYAN, VIRGINIA Address: 16203 NOTTINGHAM PARK WAY City-St-Zip: TAMPA, FL 33647	Title: MGRM (X) Change ( ) Addition Name: RYAN, VIRGINIA A Address: 16203 NOTTINGHAM PARK WAY City-St-Zip: TAMPA, FL 33647

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: WARREN WILLIAMSON   MGRM   01/10/2009

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