

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000100744

FILED
Mar 20, 2009
Secretary of State

Entity Name: SEVEN STARS REALTY GROUP, LLC

Current Principal Place of Business:

1941 WHITFIELD PARK LOOP
SARASOTA, FL 34243 US

New Principal Place of Business:

Current Mailing Address:

1941 WHITFIELD PARK LOOP
SARASOTA, FL 34243 US

New Mailing Address:

FEI Number: 26-3623609

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SIMONE, GARY
1941 WHITFIELD PARK LOOP
SARASOTA, FL 34243 US

Name and Address of New Registered Agent:

SIMONE, GARY OWNER
1941 WHITFIELD PARK LOOP
SARASOTA, FL 34243 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: EILEEN SIMONE

03/20/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SIMONE, GARY
Address: 1941 WHITFIELD PARK LOOP
City-St-Zip: SARASOTA, FL 34243 US

Title: MGRM () Delete
Name: RUTIGLIANO, GEORGE
Address: 1941 WHITFIELD PARK LOOP
City-St-Zip: SARASOTA, FL 34243 US

Title: MGRM () Delete
Name: SIMONE, DARRIN
Address: 1941 WHITFIELD PARK LOOP
City-St-Zip: SARASOTA, FL 34243 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: GARY SIMONE

OWNE

03/20/2009

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