2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L98000002037

1. Entity Name

REAL DEAL OF WEST FLORIDA, L.C.



FILED Apr 26, 2004 08:00 AM Secretary of State

Principal Place of Business

5050 W. LEMON STREET

TAMPA, FL 33609

Mailing Address

5050 WEST LEMON ST TAMPA, FL 33609



03152004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 59-3536177 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MARTIN III, JAMES J 5050 WEST LEMON ST TAMPA, FL 33609

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8.	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	I am familiar with	and accept
	the obligations of registered agent.		

SIGNATURE

NAME STREET ADDRESS CITY+ST-ZIP Signature, typed or printed name of registered agent and title if applicable

(NOTE Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00 Due by May 1, 2004

U00000128553 04/26/04-68044-092 50.60

9.	MANAGING MEMBERS/MANAGERS
NAME STREET ADDRESS CITY - ST - ZIP	MGR BEAN, RONALD 5050 WEST LEMON ST TAMPA, FL 33609
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY: ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TUTLE NAME STREET ADDRESS CITY+ST+ZIP	
TITLE	

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11. I hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes if further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that if 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: POR PRINTED HAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4-2204

401-896-3030

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