2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L98000003455

1. Entity Name FOXFIRE REALTY, L.L.C.



FILED
Jan 07, 2008 08:00 AM
Secretary of State

Principal Place of Business

615 E. SILVER SPRINGS BOULEVARD OCALA. FL 34470

Mailing Address

615 E. SILVER SPRINGS BOULEVARD OCALA, FL 34470

DO NOT WRITE IN THIS SPACE

01032008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 59-3549664

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BOONE, EUGENE R 615 E. SILVER SPRINGS BOULEVARD OCALA, FL 34470

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8.	The above named entity submits this statement for the purpose of changing its registered office or re	egistered agent, or both, in the State of Fl-	orida. I am familiar with, and accept
	the obligations of registered agent.		
r			

SIGNATURE.

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating

DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

9.	9. MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FOXFIRE REALTY, INC. 615 E. SILVER SPRINGS BOULEVARD OCALA, FL 34470			
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11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I 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 I am a managing member or manager of the limited liability company or the receiver or truetes empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1.Llas

352-732-3346

Daytime Phone #