2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L99000001793

1. Entity Name

CARLISLE REALTY GROUP, L.L.C.



FILED
Jan 24, 2005 08:00 AM
Secretary of State

Principal Place of Business

SIGNATURE:

369 N. NEW YORK AVENUE, 3RD FLOOR WINTER PARK, FL 32789

DO NOT WRITE IN THIS SPACE

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

369 N. NEW YORK AVENUE, 3RD FLOOR WINTER PARK, FL 32789

Mailing Address



01192005 No Chg-LLC

CR2E083 (10/03)

4.	FEI Number
	59-3571589

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BUILDER, J. LINDSAY JR. 369 N. NEW YORK AVENUE, 3RD FLOOR WINTER PARK, FL 32789

DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the purpose of chan lons of registered agent.	ging its registered office or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title if goolicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2005			U00000191044 01/24/05-80159-007 50.00
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SHANNON, MICHAEL V 753 E. GLENN AVENUE AUBURN, AL 36831		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FINDURA, MARK L 400 PARK AVENUE SOUTH, SUITE 220 WINTER PARK, FL 32789		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-SY-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		7	······································
11. I hereby of indicated limited lia	certify that the information supplied with this filing does not que on this report is true and accurate and that my signature she billity company or the receiver or trustee empowered to execute.	ualify for the exemption stated in Section 119.07(3) If have the same legal effect as if made under cati ute this report as required by Chapter 608, Florida	(i), Florida Statutes. I further certify that the information is that I am a managing member or manager of the Statutes.