2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 31, 2009
Secretary of State

DOCUMENT# M04000004365

Entity Name: IMPERIALE REALTY GROUP, LLC

Current Principal Place of Business:

353 S. HAMPTON CLUB WAY
ST. AUGUSTINE, FL 32092

New Principal Place of Business:

Current Mailing Address:

353 S. HAMPTON CLUB WAY
ST. AUGUSTINE, FL 32092

New Mailing Address:

FEI Number: 20-1582426 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

RENALDY, DELPHINE M
353 S. HAMPTON CLUB WAY
ST. AUGUSTINE, FL 32092 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title:	MGRM	( ) Delete
Name:	RENALDY, DELPHINE M	
Address:	353 S. HAMPTON CLUB WAY	
City-St-Zip:	ST. AUGUSTINE, FL 32092	
Title:	MGRM	( ) Delete
Name:	RENALDY, CARMEN A III	
Address:	353 S. HAMPTON CLUB WAY	
City-St-Zip:	ST. AUGUSTINE, FL 32092	
Title:	MGRM	( ) Delete
Name:	RISEN, AARON P	
Address:	13907 LACLARA WAY	
City-St-Zip:	LOUISVILLE, KY 40299	
Title:	MGRM	( ) Delete
Name:	RISEN, SHARON	
Address:	13907 LACLARA WAY	
City-St-Zip:	LOUISVILLE, KY 40299	

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:	
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: DELPHINE M RENALDY MGRM 01/31/2009

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