

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M05000002983

1. Entity Name  
SOUTHWEST FLORIDA REAL ESTATE, LLC



Principal Place of Business  
26711 NORTHWESTERN HIGHWAY STE 460  
SOUTHFIELD, MI 48034

Mailing Address  
26711 NORTHWESTERN HIGHWAY STE 460  
SOUTHFIELD, MI 48034

**FILED**  
**Jul 14, 2008 08:00 AM**  
**Secretary of State**



07082008No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
20-2504340

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

MEININGER, NANCY K  
1220 SW 54TH LANE  
CAPE CORAL, FL 33914

**DO NOT WRITE  
IN THIS SPACE**

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

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**  
**Due by September 12, 2008**

In accordance with s. 607.193(2)(b), F.S., the limited  
liability company did not receive the prior notice.

000000954789  
07/14/08-80015-005 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	SATOVSKY, HOWARD M
STREET ADDRESS	26711 NORTHWESTERN HIGHWAY, SUITE 460
CITY-ST-ZIP	SOUTHFIELD, MI 48034
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing 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 trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

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

Date

Daytime Phone #

248-440-9000

7/2/08