## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

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## DOCUMENT # M06000004602

1. Entity Name

ATLAS REALTY HOLDINGS, LLC



SECRETARY OF STATE DIVISION OF CORPORATIONS

08 APR 24 AM 9: 41

Principal Place of Business

1077 W. BLUE HERON BLVD. WEST PALM BEACH, FL 33404 Mailing Address

1077 W. BLUE HERON BLVD. WEST PALM BEACH, FL 33404



02262008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 56-2604534

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required -----

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_	N	_

COHN, BENNETT S ESQ 1806 OLD OKEECHOBEE ROAD WEST PALM BEACH, FL 33409

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8	. The above named entity submits the	h)e,	tatement fo	r the purpose o	f changing its registere	ed office or registered agent	, or both, in the State of Florida.	I am familiar with, and accept
	the obligations of registered agent	<u>.</u> ]				-		
		7	1/1/2					
_		- 1	// /					

SIGNATURE

stered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

## . FILE NOW!!! FEE 18 \$138.75 After May 1, 2008 Fee will be \$538.75

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9.	MANAGING MEMBERS/MANAGERS						
TITLE	MGR						
NAME	ADINOLFE, JEFFERY						
STREET ADDRESS	1077 W. BLUE HERON BLVD.						
CITY-ST-ZIP	WEST PALM BEACH, FL 33404						
TITLE	MGR						
NAME	ADINOLFE, JOSEPH						
STREET ADDRESS	1077 W. BLUE HERON BLVD.						
Cri Y-ST-ZIP	WEST PALM BEACH, FL 33404						
TITLE	MGR						
NAME	ADINOLFE, JAMES						
STREET ADDRESS	1077 W. BLUE HERON BLVD.						
CITY-ST-ZIP	WEST PALM BEACH, FL 33404						
TITLE							
NAME							
STREET ADDRESS							
CITY-ST-ZIP							
TITLE							
NAME							
STREET ADDRESS							
CITY-ST-ZIP							
TITLE							
NAME							
STREET ADDRESS							
CITY-ST-ZIP	<u> </u>						

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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 this teaching ownered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

BIGNATURE AND DYPED OR PR

SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3/1/28

561-763-665

Daytime Phone #