

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# M08000003616

**FILED**  
**Apr 28, 2010**  
**Secretary of State**

**Entity Name:** FORD REALTY GROUP, LLC

**Current Principal Place of Business:**

759 S. FEDERAL HIGHWAY, SUITE 217  
STUART, FL 34994

**New Principal Place of Business:**

759 FEDERAL HIGHWAY  
SUITE 312  
STUART, FL 34994

**Current Mailing Address:**

759 S. FEDERAL HIGHWAY, SUITE 217  
STUART, FL 34994

**New Mailing Address:**

238 S W PALM COVE DRIVE  
PALM CITY, FL 34990

**FEI Number:** 25-1884099      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

JOSEPH A. FORD, SR.  
238 SW PALM COVE DRIVE  
PALM CITY, FL 349904341 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: JOSEPH A FORD SR

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** FORD, JOSEPH A SR.  
**Address:** 759 S. FEDERAL HIGHWAY, SUITE 217  
**City-St-Zip:** STUART, FL 34994

**Title:** MGRM  
**Name:** FORD, PATRACIA A  
**Address:** 238 S W PALM COVE DRIVE  
**City-St-Zip:** PALM CITY, FL 34990

I hereby 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: JOSEPH A FORD, SR

MGRM

04/28/2010

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