2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L96000001041

Entity Name: M/S REALTY ASSOCIATES, L.C.

FILED Jan 09, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1025 S.W. MARTIN DOWNS BLVD. PALM CITY, FL 34990

Current Mailing Address: New Mailing Address:

1025 S.W. MARTIN DOWNS BLVD. PALM CITY, FL 34990

FEI Number: 11-3240646 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

UCC FILING & SEARCH SERVICES, INC.

1574 VILLAGE SQUARE BLVD

SUITE 100

TALLAHASSEE, FL 32309 US

SCHACHTER, MICHAEL PRES

1025 SW MARTIN DOWNS BLVD.

PALM CITY, FL 34990 US

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: MICHAEL SCHACHTER 01/09/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

 Title:
 MGRM () Delete
 Title:
 MGRM (X) Change () Addition

 Name:
 SCHACHTER, MICHAEL
 Name:
 SCHACHTER, MICHAEL

 Address:
 1910 S.E. PORT ST. LUCIE BLVD.
 Address:
 1025 SW MARTIN DOWNS BLVD.

City-St-Zip: PORT ST. LUCIE, FL 34952 City-St-Zip: PALM CITY, FL 34990

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: SCHACHTER, DIANE T SCHACHTER, DIANE T

Name: SCHACHTER, DIANE T Name: SCHACHTER, DIANE T
Address: 1910 S.E. PORT ST. LUCIE BLVD. Address: 1025 SW MARTIN DOWNS BLVD.

Address: 1910 S.E. PORT ST. LUCIE BLVD. Address: 1025 SW MARTIN DOWNS BLVD
City-St-Zip: PORT ST. LUCIE, FL 34952 City-St-Zip: PALM CITY, FL 34990

Title: MGRM (X) Delete Title: () Change () Addition

 Name:
 SCHACHTER, MICHAEL
 Name:

 Address:
 601-621 PORT ST. LUCIE BLVD.
 Address:

 City-St-Zip:
 PORT ST. LUCIE, FL
 City-St-Zip:

Title: MGRM (X) Delete Title: () Change () Addition Name: SCHACHTER, DIANET Name:

Address: 601-621 PORT ST. LUCIE BLVD. Address: City-St-Zip: PORT ST. LUCIE, FL 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: MICHAEL SCHACHTER PRES 01/09/2009