

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000066226

**Entity Name:** REALVEST EQUITY PARTNERS, LLC**Current Principal Place of Business:**1800 PEMBROOK DRIVE  
SUITE 350  
ORLANDO, FL 32810**Current Mailing Address:**1800 PEMBROOK DRIVE  
SUITE 350  
ORLANDO, FL 32810 US**FEI Number:** 80-0218033**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MAHONEY, PATRICK J  
1800 PEMBROOK DRIVE  
SUITE 350  
ORLANDO, FL 32810 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:**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MANAGER
Name	PARTYKA, PAUL P
Address	1800 PEMBROOK DRIVE SUITE 350
City-State-Zip:	ORLANDO FL 32810
Title	MANAGER
Name	HEIDRICH, MICHAEL F
Address	1800 PEMBROOK DRIVE SUITE 350
City-State-Zip:	ORLANDO FL 32810
Title	MANAGER
Name	LIVINGSTON, GEORGE DII
Address	1800 PEMBROOK DRIVE SUITE 350
City-State-Zip:	ORLANDO FL 32810
Title	MANAGER
Name	VIELE, GEORGE J
Address	1800 PEMBROOK DRIVE SUITE 350
City-State-Zip:	ORLANDO FL 32810

Title	MANAGER
Name	O'CONNOR, EDWARD KEVIN
Address	1800 PEMBROOK DRIVE SUITE 350
City-State-Zip:	ORLANDO FL 32810
Title	MANAGER
Name	MAHONEY, PATRICK J
Address	1800 PEMBROOK DRIVE SUITE 350
City-State-Zip:	ORLANDO FL 32810
Title	MANAGER
Name	WEBB, ROBIN L
Address	1800 PEMBROOK DRIVE SUITE 350
City-State-Zip:	ORLANDO FL 32810
Title	MANAGER
Name	HANKINS, THOMAS E
Address	1800 PEMBROOK DRIVE SUITE 350
City-State-Zip:	ORLANDO FL 32810

**Continues on page 2**

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** PATRICK MAHONEY

MANAGER

04/21/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date

**Authorized Person(s) Detail Continued :**

Title	MANAGER
Name	ALEXANDER, CHRISTIE
Address	1800 PEMBROOK DRIVE SUITE 350
City-State-Zip:	ORLANDO FL 32810