2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 23, 2008
Secretary of State

DOCUMENT# L03000014281

Entity Name: PRICE INVESTMENT ENTERPRISES, LLC

Current Principal Place of Business:

C/O ANDREW PRICE
376 GOLF COURSE ROAD
SOUTH BURLINGTON, VT 05403

New Principal Place of Business:

Current Mailing Address:

C/O ANDREW PRICE
376 GOLF COURSE ROAD
SOUTH BURLINGTON, VT 05403

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CLASP INC.
3001 TAMIAMI TRAIL NORTH, 4TH FLOOR
NAPLES, FL 34103 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: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: PRICE, ANDREW
Address: 376 GOLF COURSE ROAD
City-St-Zip: SOUTH BURLINGTON, VT 05403

Title: MGR ( ) Delete
Name: ROSS, RICHARD M JR
Address: 376 GOLF COURSE ROAD
City-St-Zip: SOUTH BURLINGTON, VT 05403

Title: MGR ( ) Delete
Name: PRICE, JEFFREY
Address: 709 FOREST GROVE ROAD
City-St-Zip: WYCOMBE, PA 18980

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: ANDREW PRICE MGR 04/23/2008

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