

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000105370

Entity Name: PNC INVESTMENTS LLC

FILED  
Apr 21, 2009  
Secretary of State

**Current Principal Place of Business:**

2019 WEST PLATT STREET  
TAMPA, FL 33606

**New Principal Place of Business:**

309 SOUTH HOWARD AVENUE  
TAMPA, FL 33606

**Current Mailing Address:**

2019 W PLATT ST  
TAMPA, FL 33606

**New Mailing Address:**

303 SOUTH MELVILLE AVENUE  
TAMPA, FL 33606

FEI Number: 20-5792737

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SCOTT, CHRISTOPHER  
2019 WEST PLATT STREET  
TAMPA, FL 33606 US

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

MUSTARD, LEWIS  
303 SOUTH MELVILLE AVENUE  
TAMPA, FL 33606 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: LEWIS MUSTARD

04/21/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SCOTT, CHRISTOPHER  
Address: 2019 WEST PLATT STREET  
City-St-Zip: TAMPA, FL 33606

Title: MGRM (X) Delete  
Name: ORTIZ, THOMAS  
Address: 2019 WEST PLATT STREET  
City-St-Zip: TAMPA, FL 33606

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: MUSTARD, LEWIS  
Address: 303 SOUTH MELVILLE AVENUE  
City-St-Zip: TAMPA, FL 33606

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: LEWIS MUSTARD

MGRM

04/21/2009

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