



2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 19, 2006 08:00 AM
Secretary of State

DOCUMENT # M05000002479 1. Entity Name SOUTHWEST PROPERTY INVESTORS, LLC	
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Principal Place of Business 3570 KEITH ST, NW CLEVELAND, TN 37312	Mailing Address 3570 KEITH ST, NW CLEVELAND, TN 37312
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DO NOT WRITE IN THIS SPACE

	
07032006 No Chg-LLC	CR2E083 (11/05)
4. FEI Number 20-2749624	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$50.00
Due by September 6, 2006**

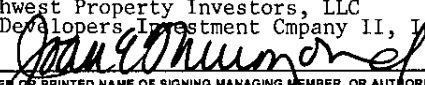
9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PRESTON, FORREST L 3570 KEITH ST, NW CLEVELAND, TN 37312
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DEVELOPERS INVESTMENT COMPANY II, INC. 3570 KEITH ST, NW CLEVELAND, TN 37312
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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07/19/06-80011-002 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

Southwest Property Investors, LLC
 By: Developers Investment Company II, Inc., Corporate Manager

SIGNATURE:  7/18/06 (423) 473-5868
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

Joan E. Thurmond, Assistant Secretary of Corporate Manager