

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 28, 2006 08:00 AM
Secretary of State

DOCUMENT # L99000007568

1. Entity Name

DIVOSTA INVESTMENTS, LLC



Principal Place of Business

**4500 PGA BOULEVARD, SUITE 207
PALM BEACH GARDENS, FL 33418**

Mailing Address

**4500 PGA BOULEVARD, SUITE 207
PALM BEACH GARDENS, FL 33418**



03212006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0960130

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BRANDT, PHILLIP L
4500 PGA BOULEVARD, SUITE 207
PALM BEACH GARDENS, FL 33418**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	OTTO B. DIVOSTA REVOCABLE TRUST
STREET ADDRESS	4500 PGA BLVD., SUITE 207
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418
TITLE	MGRM
NAME	BETTY J. DIVOSTA REVOCABLE TRUST
STREET ADDRESS	4500 PGA BLVD., STE 207
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418
TITLE	MGR
NAME	BRANDT, PHILLIP L
STREET ADDRESS	4500 PGA BLVD., STE 207
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418
TITLE	MGR
NAME	DIVOSTA, OTTO B
STREET ADDRESS	4500 PGA BOULEVARD, SUITE 207
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/10/06-80054-006 50.00

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE:

Phillip Brandt

Phillip Brandt

3/21/06

561-688-7000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #