2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2009
Secretary of State

DOCUMENT# 290391

Entity Name: INVESTMENTS UNLIMITED, INC.

Current Principal Place of Business:

50 MIRACLE STRIP PARKWAY S.E.
P O BOX 623
FT WALTON BEACH, FL 32549

New Principal Place of Business:

50 MIRACLE STRIP PARKWAY S.E.
FT WALTON BEACH, FL 32549

Current Mailing Address:

PO BOX 623
FT WALTON BEACH, FL 32549

New Mailing Address:

50 MIRACLE STRIP PARKWAY S.E.
P O BOX 623
FT WALTON BEACH, FL 32549

FEI Number: 59-1108655 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LONG, CLIFFORD H
50 MIRACLE STRIP PKWY, SE
FT. WALTON BEACH, FL 32548 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: LONG, CLIFFORD H
Address: 50 MIRCLE STRIP PKWY,S.E
City-St-Zip: FT WALTON BEACH, FL 32548

Title: DST ( ) Delete
Name: RUCKEL, C. WALTER
Address: 222 ROCKWOOD LANE
City-St-Zip: NICEVILLE, FL 32578

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CLIFFORD LONG PD 01/09/2009

Electronic Signature of Signing Officer or Director — Date