


**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**

**Apr 17, 2006 8:00 am  
Secretary of State**

04-05-2006 90020 008 \*\*\*\*50.00

DOCUMENT # L00000015336 1. Entity Name CPA WEALTH INVESTMENTS, LLC	
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Principal Place of Business 215 BAYTREE DRIVE MELBOURNE, FL 32940	Mailing Address 215 BAYTREE DRIVE MELBOURNE, FL 32940
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03242006No Chg-LLC CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-3685525	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  KIRK, THOMAS L 215 BAYTREE DRIVE MELBOURNE, FL 32940
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**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 \_\_\_\_\_ (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 May 1, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM KIRK, THOMAS L 215 BAYTREE DRIVE MELBOURNE, FL 32940
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR HOYMAN, CHARLES W JR. 215 BAYTREE DRIVE MELBOURNE, FL 32940
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR OSWALT, BARBARA J 215 BAYTREE DRIVE MELBOURNE, FL 32940
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR RAWLEY E. KIRKLAND 1163 USTAVIA CIRCLE MELBOURNE, FL 32940
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR DEBORAH A. BRADLEY 2450 WOODS LANE MELBOURNE, FL 32934
TITLE NAME STREET ADDRESS CITY- ST- ZIP	

**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: Charles W. Hoyman Jr Charles W. Hoyman Jr 3/30/06 321-255-0688  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #