## 2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

## **FILED** Apr 06, 2005 08:00 AM Secretary of State **DOCUMENT # L01000003309** 1. Entity Name MARÍON INVESTMENTS, LLC Principal Place of Business Mailing Address 1205 N.W. 27TH AVENUE 1205 N.W. 27TH AVENUE OCALA, FL 34475 OCALA, FL 34475 03152005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3704880 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent BULLARD, WARREN DO NOT WRITE 18 N.W. THIRD AVENUE OCALA, FL 34475 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, 2005 MANAGING MEMBERS/MANAGERS 9. MGR TITLE NAME BOOTHBY, WILLIAM G STREET ADDRESS 1205 N.W. 27TH AVENUE OCALA, FL 34475 CITY-ST-ZIP U0000028**9**633 TITLE 04706705-80034-014 50.00 MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

STREET ADDRESS