2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 17, 2007 08:00 AM
Secretary of State

DOCUMENT # L02000006840

1. Entity Name
JUHL INVESTMENTS, LLC

Principal Place of Business	Mailing Address
1307 LITTLE BLUE HERON CT. NAPLES, FL 34108	1307 LITTLE BLUE HERON CT. NAPLES, FL 34108

01092007 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
03-0430534
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

JUHL, DONALD M
1307 LITTLE BLUE HERON COURT
NAPLES, FL 34108

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

Filing Fee is $50.00
Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS	
TITLE	T
NAME	JUHL, DONALD M
STREET ADDRESS	1307 LITLE BLUE HERON COURT
CITY-ST-ZIP	NAPLES, FL 34108
TITLE	S
NAME	JUHL, DONALD R
STREET ADDRESS	152 FOX GLEN DR
CITY-ST-ZIP	NAPLES, FL 34104
TITLE	VP
NAME	JUHL, MARGANET
STREET ADDRESS	152 FOX GLEN DR.
CITY-ST-ZIP	NAPLES, FL 34104
TITLE	P
NAME	JUHL, VALIERIE K
STREET ADDRESS	1307 LITTLE BLUE HERON CT.
CITY-ST-ZIP	NAPLES, FL 34104
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/17/07-80086-003 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.

SIGNATURE: _____ 1/9/2007 (239)596-1224
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #