2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 06, 2006
Secretary of State

DOCUMENT# L02000009861

Entity Name: TROPIQUES D'AZURES INVESTMENTS, L.L.C.

Current Principal Place of Business:

2858 LONE PINE LANE
NAPLES, FL

New Principal Place of Business:

Current Mailing Address:

PO BOX 111365
NAPLES, FL 34108

New Mailing Address:

PO BOX 111365
NAPLES, FL 34108 01

FEI Number: 02-0571942 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROSS, DONALD K JR ESQ
2640 GOLDEN GATE PARKWAY, SUITE 206
NAPLES, FL 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

MANAGING MEMBERS/MANAGERS:

Title: P ( ) Delete
Name: EYNAND, RAYMOND P
Address: 2858 CONT PINE LANE
City-St-Zip: NAPLES, FL 34119

Title: S ( ) Delete
Name: EYNAND, LINDA L
Address: 2858 CONT PINE LANE
City-St-Zip: NAPLES, FL 34119

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: EYNARD, RAYMOND A
Address: 2858 LONE PINE LANE
City-St-Zip: NAPLES, FL 34119

Title: MGR (X) Change ( ) Addition
Name: EYNARD, LINDA L
Address: 2858 LONE PINE LANE
City-St-Zip: NAPLES, FL 34119

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: RAYMOND A. EYNARD MGR 01/06/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date