2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

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DOCUMENT # L'02000014257

1. Entity Name

STATE ROAD INVESTMENTS, L.L.C.



Principal Place of Business

986 DOUGLAS AVENUE, SUITE 100 ALTAMONTE SPRINGS, FL 32714 Mailing Address

986 DOUGLAS AVENUE, SUITE 100 ALTAMONTE SPRINGS, FL 32714

FILED Jan 11, 2005 8:00 am Secretary of State

01-11-2005 90021 009 ****50.00

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01052005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 03-0472715 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

STARK, CHARLES H 986 DOUGLAS AVENUE, SUITE 100 ALTAMONTE SPRINGS, FL 32714

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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.			
SIGNAT	TURE	•	
	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		
9.	MANAGING MEMBERS/MANAGERS		

MGRM TITLE STARK, CHARLES H NAME STREET ADDRESS 986 DOUGLAS AVENUE, SUITE 100 CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32714 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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11. I hereby certify that the information supplied with this filling 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 trusted empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

15/05

Daytime Phone #