

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000018217

FILED
Jan 30, 2007
Secretary of State

Entity Name: CHASON INVESTMENTS LLC

Current Principal Place of Business:

C/O ROGER E. BROWNELL
17051 JEAN STREET, UNIT #1
FORT MYERS, FL 33912

New Principal Place of Business:

C/O ROGER E. BROWNELL
17051 JEAN STREET, UNIT #1
FORT MYERS, FL 33967

Current Mailing Address:

C/O ROGER E. BROWNELL
17051 JEAN STREET, UNIT #1
FORT MYERS, FL 33912

New Mailing Address:

C/O ROGER E. BROWNELL
17051 JEAN STREET, UNIT #1
FORT MYERS, FL 33967

FEI Number: 05-0522318

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWNELL, ROGER E
C/O ROGER E. BROWNELL
17051 JEAN STREET, UNIT #1
FORT MYERS, FL 33912 US

Name and Address of New Registered Agent:

BROWNELL, ROGER E
C/O ROGER E. BROWNELL
17051 JEAN STREET, UNIT #1
FORT MYERS, FL 33967 US

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: _____

01/30/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BROWNELL, ROGER
Address: 17051 JEAN STREET, UNIT #1
City-St-Zip: FORT MYERS, FL 33912

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BROWNELL, ROGER
Address: 17051 JEAN STREET, UNIT #1
City-St-Zip: FORT MYERS, FL 33967

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: ROGER E BROWNELL

MGRM

01/30/2007

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