

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000020938

FILED
Jun 30, 2005
Secretary of State

Entity Name: L&M INVESTMENT COMPANY, LLC

Current Principal Place of Business:

480 N. ORLANDO AVE., SUITE 110
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

4562 REDMOND PLACE
SANFORD, FL 32771

New Mailing Address:

FEI Number: 16-1622066 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

LYNCH, KEVIN M
4562 REDMAN PLACE
SANFORD, FL 32771 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LYNCH, KEVIN M
Address: 4562 REDMOND PLACE
City-St-Zip: SANFORD, FL 32771

Title: MGRM () Delete
Name: LYNCH, REBECCA M
Address: 4562 REDMOND PLACE
City-St-Zip: SANFORD, FL 32771

Title: MGRM () Delete
Name: MENDEZ, JENNIFER
Address: 1036 HORSESHOE FALLS DRIVE
City-St-Zip: ORLANDO, FL 32828

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KEVIN M LYNCH

MGRM

06/30/2005

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