


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 18, 2005 08:00 AM
Secretary of State

| | |
|---|---|
| DOCUMENT # L02000029060 1. Entity Name COREY INVESTMENTS, LLC |  |
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|---|---|
| Principal Place of Business 14A HARGROVE GRADE PALM COAST, FL 32137 | Mailing Address 14A HARGROVE GRADE PALM COAST, FL 32137 |
|---|---|

DO NOT WRITE IN THIS SPACE



03102005 No Chg-LLC

CR2E083 (10/03)

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| 4. FEI Number 30-0143527 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

| | |
|--|---------------------------------------|
| 6. Name and Address of Current Registered Agent KATZ, B. PAUL 1 FLORIDA PARK DRIVE SOUTH, ATRIUM STE. 1 PALM COAST, FL 32137 | DO NOT WRITE IN THIS SPACE |
|--|---------------------------------------|

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

**Filing Fee is \$50.00
Due by May 1, 2005**

| 9. MANAGING MEMBERS/MANAGERS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGR COREY, ELIAS R PO BOX 350454 PALM COAST, FL 321350454 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGR COREY, ANDREA B PO BOX 350454 PALM COAST, FL 321350454 |
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03/18/05-80050-012 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Andrea B. Corey, MGR 03-12-05 (386) 445-1753
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #