## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **FILED** ANNUAL REPORT Jul 24, 2006 08:00 AM **DOCUMENT # L02000030375 Secretary of State** 1. Entity Name REPETTI INVESTMENTS, LLC Principal Place of Business Mailing Address 2050 ARUBA AVENUE **2050 ARUBA AVENUE** FT MYERS, FL 33905 FT MYERS, FL 33905 07102006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 13-4233986 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent STRONG, KENNETH T DO NOT WRITE 1916 BOLADO PKY CAPE CORAL, FL 33990 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. 1 am familiar with, and accept the obligations of registered agent. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by September 6, 2006 U000000572155 07/25/06-80017-022 50.00 MANAGING MEMBERS/MANAGERS MGR TITLE NAME REPETTI, MARIA G 2050 ARUBA AVENUE STREET ADDRESS FT MYERS, FL 33905 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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: M. Repotti

CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP