2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000030688 1. Entity Name MIMS INVESTMENTS, LLC



Principal Place of Business

Mailing Address

100 SOUTH KENTUCKY AVENUE, SUITE 215 LAKELAND, FL 33801

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FILED Mar 21, 2008 08:00 A Secretary of State



03122008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number		Applied For
02-0686834		Not Applicable
5. Certificate of Status Desired	\$5.00 Fee Re	O Additional equired

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

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

T. MIMS CORP. 100 S. KENTUCKY AVE., STE. 215 LAKELAND, FL 33801

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 required when reinstating) FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM T. MIMS CORP. 100 S. KENTUCKY AVE., STE. 215 LAKELAND, FL 33810	<u> </u>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		U00000856386 04/08/08-80027-005 138.75		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE		
NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
indicated	on this report is true and accurate and that my signature	at qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information shall have the same legal effect as if made under oath; that I am a managing member or manager of the execute this report as required by Chapter 608, Florida Statutes		