

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000033573

FILED
Jan 05, 2007
Secretary of State

Entity Name: FORT MYERS INVESTMENTS,LLC

Current Principal Place of Business:

1212 S.W. 20TH ST.
CAPE CORAL, FL 33991 US

New Principal Place of Business:

Current Mailing Address:

1212 S.W. 20TH ST.
CAPE CORAL, FL 33991 US

New Mailing Address:

FEI Number: 06-1665763 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZUPKE, WOLFGANG
1212 20TH ST.
CAPE CORAL, FL 33991 US

Name and Address of New Registered Agent:

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: ZUPKE, WOLFGANG MGRM
Address: 2310 SE 28TH STREET
City-St-Zip: CAPE CORAL, FL 33904 US

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Title: MGRM () Delete
Name: ZUPKE, WOLFGANG
Address: 1212 SW 20TH ST.
City-St-Zip: CAPE CORAL, FL 33991

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ZUPKE, WOLFGANG MGRM
Address: 1212 SW 20 STREET
City-St-Zip: CAPE CORAL, FL 33991 US

Title: MGRM (X) Change () Addition
Name: ZUPKE, WOLFGANG
Address: 1212 SW 20TH STREET
City-St-Zip: CAPE CORAL, FL 33991 US

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 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: WOLFGANG ZUPKE

MGRM

01/05/2007

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