

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jun 03, 2005 8:00 am
Secretary of State

04-26-2005 90010 036 ****50.00

DOCUMENT # L03000006541 1. Entity Name FMB INVESTMENTS, LLC																																				
<table style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> Principal Place of Business 1335 SANTOS ROAD FORT MYERS BEACH, FL 33931 </td> <td style="width: 50%; vertical-align: top;"> Mailing Address 1335 SANTOS ROAD FORT MYERS BEACH, FL 33931 </td> </tr> </table>			Principal Place of Business 1335 SANTOS ROAD FORT MYERS BEACH, FL 33931	Mailing Address 1335 SANTOS ROAD FORT MYERS BEACH, FL 33931																																
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DO NOT WRITE IN THIS SPACE																																				
6. Name and Address of Current Registered Agent WINESETT, RICHARD W 2248 FIRST STREET FORT MYERS, FL 33901		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: Signature, typed or printed name of registered agent and title if applicable. 5-14-05 DATE																																				
Filing Fee is \$30.00 Due by May 1, 2005																																				
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: left; padding: 2px;">9. MANAGING MEMBERS/MANAGERS</th> </tr> <tr> <td style="width: 15%; padding: 2px;">TITLE</td> <td style="padding: 2px;">P</td> </tr> <tr> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;">PARILLA, DAVID R</td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;">1335 SANTOS RD.</td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;">FORT MYERS BEACH, FL 33931</td> </tr> <tr><td style="padding: 2px;">TITLE</td><td style="padding: 2px;"></td></tr> <tr><td style="padding: 2px;">NAME</td><td style="padding: 2px;"></td></tr> <tr><td style="padding: 2px;">STREET ADDRESS</td><td style="padding: 2px;"></td></tr> <tr><td style="padding: 2px;">CITY-ST-ZIP</td><td style="padding: 2px;"></td></tr> <tr><td style="padding: 2px;">TITLE</td><td style="padding: 2px;"></td></tr> <tr><td style="padding: 2px;">NAME</td><td style="padding: 2px;"></td></tr> <tr><td style="padding: 2px;">STREET ADDRESS</td><td style="padding: 2px;"></td></tr> <tr><td style="padding: 2px;">CITY-ST-ZIP</td><td style="padding: 2px;"></td></tr> <tr><td style="padding: 2px;">TITLE</td><td style="padding: 2px;"></td></tr> <tr><td style="padding: 2px;">NAME</td><td style="padding: 2px;"></td></tr> <tr><td style="padding: 2px;">STREET ADDRESS</td><td style="padding: 2px;"></td></tr> <tr><td style="padding: 2px;">CITY-ST-ZIP</td><td style="padding: 2px;"></td></tr> </table>			9. MANAGING MEMBERS/MANAGERS		TITLE	P	NAME	PARILLA, DAVID R	STREET ADDRESS	1335 SANTOS RD.	CITY-ST-ZIP	FORT MYERS BEACH, FL 33931	TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP	
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 606, Florida Statutes. SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE 5-31-05 DATE																																				



01072005 No Chg-LLC CR2E063 (10/03)

4. FEI Number 43-2000600	Applied For ☒ Not Applicable
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required	