

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 20, 2006 8:00 am
Secretary of State

02-20-2006 90145 038 ****50.00

DOCUMENT # L03000023840

1. Entity Name
ALF INVESTMENTS, L.L.C.



Principal Place of Business Mailing Address
606 SHOREWOOD DRIVE 4405 London Town Rd.
CAPE CANAVERAL, FL 32920 Titusville FL 32796

2. Principal Place of Business 3. Mailing Address
4405 London Town Road 4405 London Town Rd.
Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
Titusville FL Titusville FL
Zip Country Zip Country
32796 32796

01302006 Chg-LLC CR2E083 (11/05)

4. FEI Number Applied For
54-2115981 Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

GRIFFIN, JACQUELINE G
606 SHOREWOOD DRIVE
CAPE CANAVERAL, FL 32920

7. Name and Address of New Registered Agent

Name **Hugh R. Griffin, Jr.**
Street Address (P.O. Box Number is Not Acceptable) **4405 LONDON TOWN ROAD**
City **Titusville** FL Zip Code **32796**

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 **Hugh R. Griffin, Jr.**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00
Due by May 1, 2006

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE **MGR** ☐ Delete
NAME **GRIFFIN, HUGH R**
STREET ADDRESS **606 SHOREWOOD DRIVE**
CITY-ST-ZIP **CAPE CANAVERAL, FL 32920**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

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TITLE ☐ Delete
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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS **4405 London Town Road**
CITY-ST-ZIP **Titusville FL 32796**

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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11. I hereby certify that the information supplied with this filing 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: **Hugh R. Griffin, Jr.**

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

1.30.06

Date

Daytime Phone #