2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000025126

1. Entity Name
THE COLONEL'S INVESTMENT, LLC

Principal Place of Business	Mailing Address
1254 SOUTH JOHN YOUNG PKWY. KISSIMMEE, FL 34741	1254 SOUTH JOHN YOUNG PKWY. KISSIMMEE, FL 34741

DO NOT WRITE IN THIS SPACE

01182008 No Chg-LLC   CR2E083 (12/07)

4. FEI Number	Applied For
32-0084878	Not Applicable

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

6. Name and Address of Current Registered Agent

CHALIFOUX, THOMAS E JR
1254 SOUTH JOHN YOUNG PKWY.
KISSIMMEE, FL 34741

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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.   (NOTE. Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

U00000876653
04/11/08-80085-001 138.75

9.	MANAGING MEMBERS/MANAGERS		
TITLE	MGRM		
NAME	CHALIFOUX, THOMAS E JR		
STREET ADDRESS	1254 SOUTH JOHN YOUNG PKWY.		
CITY-ST-ZIP	KISSIMMEE, FL 34741		
TITLE			
NAME			
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CITY-ST-ZIP			

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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: _____ Thomas E Chalifoux Jr   3/28/08   407 846-0977

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #