


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 02, 2008 08:00 AM
Secretary of State

DOCUMENT # L03000036777	
1. Entity Name HARPE INVESTMENTS, LLC	

Principal Place of Business 1490 JEWEL BOX AVENUE NAPLES, FL 34102 US	Mailing Address 1490 JEWEL BOX AVENUE NAPLES, FL 34102 US
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DO NOT WRITE IN THIS SPACE



04242008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 57-1191156	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

FOSTH ACCOUNTING, P.A.
 501 GOODLETTE RD N
 SUITE D-304
 NAPLES, FL 34102

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CHIP HARRIS PA 550 5TH AVENUE S NAPLES, FL 34102
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 05/29/08-80074-010 138.75

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: CL Harris Date: 4-29-08 Daytime Phone #: 239-370-0574

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