

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000048873

Entity Name: F & T INVESTMENTS I, LLC

FILED  
May 04, 2007  
Secretary of State

**Current Principal Place of Business:**

2045 FOUNTAIN PROFESSIONAL  
CT, SUITE B  
NAVARRE, FL 32566

**New Principal Place of Business:**

**Current Mailing Address:**

2045 FOUNTAIN PROFESSIONAL  
CT, SUITE B  
NAVARRE, FL 32566

**New Mailing Address:**

FEI Number: 86-1088050      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

FOUNTAIN LAW FIRM, P.A.  
2045 FOUNTAIN PROFESSIONAL CT  
SUITE A  
NAVARRE, FL 32566 US

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: P ( ) Delete  
Name: FOUNTAIN, BETTY  
Address: 1901 RUE LA FONTAINE  
City-St-Zip: NAVARRE, FL 32566

Title: VPS ( ) Delete  
Name: TABB, LINDA  
Address: 12317 RUNNING DEER RD.  
City-St-Zip: MANASSAS, VA 201123202

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: BETTY FOUNTAIN

PRES

05/04/2007

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