

# **2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000052339

**FILED**  
**Apr 30, 2008**  
**Secretary of State**

**Entity Name:** MATHEWS INVESTMENTS, LLC

**Current Principal Place of Business:**

445 EAST NELSON AVENUE  
DEFUNIAK SPRINGS, FL 32433

**New Principal Place of Business:**

1846 US HWY 90 WEST  
DEFUNIAK SPRINGS, FL 32433

**Current Mailing Address:**

445 EAST NELSON AVENUE  
DEFUNIAK SPRINGS, FL 32433

**New Mailing Address:**

POST OFFICE BOX 1232  
DEFUNIAK SPRINGS, FL 32433 US

**FEI Number:** 59-0848523

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MATHEWS, STEPHEN E  
445 EAST NELSON AVENUE  
DEFUNIAK SPRINGS, FL 32433 US

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

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: MGR ( ) Delete  
Name: MATHEWS, STEPHEN E  
Address: 445 EAST NELSON AVENUE  
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

**ADDITIONS/CHANGES:**

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: STEPHEN E MATHEWS

MGR

04/30/2008

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