

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

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FILED
Apr 13, 2006 8:00 am
Secretary of State

01-26-2006 90067 044 ****50.00

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1. Entity Name
ST INVESTMENTS, LLC



Principal Place of Business
**15881 SHAMROCK DRIVE
FORT MYERS, FL 33912**

Mailing Address
**15881 SHAMROCK DRIVE
FORT MYERS, FL 33912**

30004987



DO NOT WRITE IN THIS SPACE

01142006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
41-2125985

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**STROEMER, JOHN H
15881 SHAMROCK DRIVE
FORT MYERS, FL 33912**

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IN THIS SPACE**

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 reappointing.)

DATE _____

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

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	STROEMER, JOHN H
STREET ADDRESS	15881 SHAMROCK DRIVE
CITY- ST- ZIP	FORT MYERS, FL 33912
TITLE	MGRM
NAME	TUSCAN, JEFFREY M
STREET ADDRESS	21131 CAPTAIN NELSON COURT
CITY- ST- ZIP	ALVA, FL 33920
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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IN THIS SPACE**

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: _____

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

Date

Daytime Phone #

2-20-06 (239) 433-1002