

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000016122

Entity Name
P INVESTMENT, LLC



Principal Place of Business
4901 VINELAND ROAD, STE. 340
ORLANDO, FL 32811

Mailing Address
4901 VINELAND ROAD, STE. 340
ORLANDO, FL 32811



01102006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
90-0159334

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

HILL, GRANT
4901 VINELAND ROAD, SUITE 340
ORLANDO, FL 32811

**DO NOT WRITE
IN THIS SPACE**

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)

11000001345402

01/30/06-80095-024 50.00

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

MANAGING MEMBERS/MANAGERS

NAME	MGRM
NAME	HILL, GRANT
STREET ADDRESS	4901 VINELAND ROAD, SUITE 340
CITY-ST-ZIP	ORLANDO, FL 32811
NAME	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
NAME	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	
NAME	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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

1/18/06

Date

Daytime Phone #