

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000028973

FILED  
Jul 19, 2007  
Secretary of State

Entity Name: TURTLE INVESTMENTS, LLC

**Current Principal Place of Business:**

1887 SYKES CREEK DRIVE  
MERRITT ISLAND, FL 32953

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 542771  
MERRITT ISLAND, FL 32953

**New Mailing Address:**

FEI Number: 20-1023462      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:**

SOILEAU, JOHN L  
3490 NORTH US HIGHWAY 1  
COCOA, FL 32926      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: MGRM ( ) Delete  
Name: ISENBARGER, PAUL A M.D.  
Address: 1887 SYKES CREEK DRIVE  
City-St-Zip: MERRITT ISLAND, FL 32953

Title: MGRM ( ) Delete  
Name: BURTON, DALE A  
Address: 1887 SYKES CREEK DRIVE  
City-St-Zip: MERRITT ISLAND, FL 32953

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: ISENBARGER, PAUL A M.D.  
Address: 1835 HIDDEN LAKE DRIVE  
City-St-Zip: ROCKLEDGE, FL 32955

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: PAUL A. ISENBARGER, M.D.

MGRM

07/19/2007

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