

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000045561

Entity Name: CBMF INVESTMENTS, LLC

FILED
Apr 19, 2007
Secretary of State

Current Principal Place of Business:

974 RAVINE ROAD NORTH
JACKSONVILLE, FL 32259

New Principal Place of Business:

445 SR 13N SUITE 26-220
JACKSONVILLE, FL 32259

Current Mailing Address:

974 RAVINE ROAD NORTH
JACKSONVILLE, FL 32259

New Mailing Address:

445 SR 13N SUITE 26-220
JACKSONVILLE, FL 32259

FEI Number: 20-1363630

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FONDA, BLAIR
974 RAVINE ROAD NORTH
JACKSONVILLE, FL 32259 US

Name and Address of New Registered Agent:

FONDA, BLAIR M
445 SR 13N SUITE 26-220
JACKSONVILLE, FL 32259 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: BLAIR M. FONDA

04/19/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: FONDA, BLAIR
Address: 974 RAVINE ROAD NORTH
City-St-Zip: JACKSONVILLE, FL 32259

Title: MGR () Delete
Name: FONDA, CHARLES M
Address: 836 EAGLE POINT
City-St-Zip: ST AUGUSTINE, FL

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: FONDA, BLAIR
Address: 445 SR 13N SUITE 26-220
City-St-Zip: JACKSONVILLE, FL 32259

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

I hereby certify that the information supplied with this filing does not qualify for the 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: BLAIR M. FONDA

MGR

04/19/2007

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