

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 14, 2007 8:00 am
Secretary of State

03-14-2007 90213 001 ****50.00

DOCUMENT # L04000055193

1. Entity Name

GOLDEN POINT INVESTMENTS LLC



Principal Place of Business

**46 NORTH WASHINGTON BLVD., SUITE 1
SARASOTA, FL 34236**

Mailing Address

**46 NORTH WASHINGTON BLVD., SUITE 1
SARASOTA, FL 34236**

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DO NOT WRITE IN THIS SPACE

02212007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number

20-1457814

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**LPS CORPORATE SERVICES, INC.
46 NORTH WASHINGTON BLVD., SUITE 1
SARASOTA, FL 34236**

**DO NOT WRITE
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 reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE : MGR
NAME : SALVO SCHERER, LLC
STREET ADDRESS : 2152 14TH CIRCLE NORTH
CITY-ST-ZIP : ST. PETERSBURG, FL 33713

TITLE
NAME
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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 #

Frank Salvo, as MGRM of Salvo Scherer, LLC