

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000057338

FILED  
Apr 27, 2006  
Secretary of State

Entity Name: GOLD CHIP INVESTMENTS, LLC

## Current Principal Place of Business:

7831 FORESTAY DRIVE  
LAKE WORTH, FL 33467

## New Principal Place of Business:

967 ALTERNATE A1A NORTH  
SUITE 1  
JUPITER, FL 33477

## Current Mailing Address:

7831 FORESTAY DRIVE  
LAKE WORTH, FL 33467

## New Mailing Address:

967 ALTERNATE A1A NORTH  
SUITE 1  
JUPITER, FL 33477

FEI Number: 20-1456815

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WALTER H. MESSICK, P.A.  
1900 CORPORATE BLVD.  
SUITE 200 EAST  
BOCA RATON, FL 33431 US

## Name and Address of New Registered Agent:

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: MR. ( ) Delete  
Name: MYERS, JASON R MEMBER  
Address: 7831 FORESTAY DRIVE  
City-St-Zip: LAKE WORTH, FL 33467 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MR. (X) Change ( ) Addition  
Name: MYERS, JASON R MEMBER  
Address: 6542 HYPOLUXO ROAD, 331  
City-St-Zip: LAKE WORTH, FL 33467 US

Title: MR ( ) Change (X) Addition  
Name: CASSIE, DAVE MEMBER  
Address: 521 LAKE DRIVE  
City-St-Zip: DELRAY BEACH, FL 33444 US

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: JASON MYERS

MR

04/27/2006

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