

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 12, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # L04000060997**

1. Entity Name

DUCK POND INVESTMENTS, LLC



Principal Place of Business

2963 SHANNON CIRCLE  
PALM HARBOR, FL 34684

Mailing Address

2963 SHANNON CIRCLE  
PALM HARBOR, FL 34684



02022008No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

20-1505761

Applied For

Not Applicable

5. Certificate of Status Desired



**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

FOX, GREGORY A  
28050 U.S. 19 NORTH  
SUITE 100  
CLEARWATER, FL 33761

**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

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	HOM, TOBIN K
STREET ADDRESS	2963 SHANNON CIRCLE
CITY-ST-ZIP	PALM HARBOR, FL 34684
TITLE	MGRM
NAME	ROTHSCHILD, ROBERT L
STREET ADDRESS	4025 RIDGEWOOD RD.
CITY-ST-ZIP	CORLEY, OH 44321
TITLE	MGRM
NAME	GIBSON, RUSSELL L
STREET ADDRESS	436 WEST CRYSTAL DR.
CITY-ST-ZIP	SANFORD, FL 32773
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U000000955392  
03/27/08-80047-004 143.75

**DO NOT WRITE  
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:

*Tobin K. Hom* (TOBIN K. HOM)

3/10/08

789-6714

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #