## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

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

## FILED Aug 08, 2005 8:00 am Secretary of State

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1. Entity Nam	MENT # L040000702 vestments, llc	284				08-08-2005	90148 0	14 ****55	.00
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Principal Place		Mailing Address							
11 RIVER CRI		11 RIVER CREST COURT							
SEWALLS PO	INT, FL 34996-6515 US	SEWALLS POINT, FL 34996-6515 US			,				
							M	818   81 <b>8  </b>   2011   0101	TO ILI IONI
Principal Place of Business     3. Mailing Address				_		<b>                                    </b>			
	SE Island Point Lane	Konald M. War	. Warren, Esq.		_				
Suite, Apt. #, etc.		Suite, Apt. #, etc. 76 E. Euclid Ave.			07222005	Chg-LLC	CR2EC	83 (10/03)	
	<u></u> .	Suite 300						V   A	
City & State	<u></u> '	City & State			4. FEI Numb	er		)—— <del> </del>	olied For
Stuart, FL		Haddonfield, NJ		Not Applicable					
Zip	Country	<sup>Zip</sup> 08033	Coun	itry	5. Certificate	of Status Desired	窊	\$5.00 Addi	
34996		00033					n-n	Fee Required	
	6. Name and Address of Current F	Registered Agent			7. Name and	Address of New R	egistered	Agent	
				Name Un	lgas, Ro	hart C			
HALGAS, I	ROBERT C								
11 RIVER CREST COURT				Street Address (P.O. Box Number is Not Acceptable)					
SEWALLS	POINT, FL 34996-6515	· · · · · · · · · · · · · · · · · · ·	<del>.</del>						
				304	47 SE Is	land Point	Lane		
				City				Zip Code	
				St	uart		FL	- Zip Code 34996	
	named entity submits this statement for	the purpose of changing its	register	ed office or registe	red agent, or bo	oth, in the State of Flo	orida. 1 am	familiar with, a	and accept
the obligat	tions of registered agent.								l
0.01.17.105	Robert C. Halgas.	Managing Memb	er				8/2/	05	ľ
SIGNATURE .	Robert C. Halgas, Signature, typed or printed name of registered agent a	nd title if applicable. (NOT)	: Registere	d Agent signature require	d when reinstating)		DATE		
	16			••••					···
e	ling Fee is \$50.00					Mak	e check r	ayable to	ŧ
Due i	by September 7, 2005					1		ent of State	· '. [
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9.	MANAGING MEMBE	RS/MANAGERS	10.			ADDITIONS	/CHANGES	3	
TITLE	MGRM	☐ Delete	TITE	E	•			☐ Change	Addition
NAME	HALGAS, ROBERT C	E DONC	NAM	ie				_ ,	_
STREET ADDRESS	11 CREST RIVER COURT			EET ADDRESS					ŀ
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Date

Daytime Phone #