

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000071941

Entity Name: 901 INVESTMENTS, LLC

FILED  
Apr 11, 2006  
Secretary of State

## Current Principal Place of Business:

901 N HERCULES AVE  
C  
CLEARWATER, FL 33765 US

## New Principal Place of Business:

## Current Mailing Address:

901 N HERCULES AVE  
C  
CLEARWATER, FL 33765 US

## New Mailing Address:

FEI Number: 20-1709148      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PAPPAS, GEORGE G  
901 N HERCULES AVE  
C  
CLEARWATER, FL 33765 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: MGRM ( ) Delete  
Name: PAPPAS, GEORGE E  
Address: 901 N HERCULES AVE STE C  
City-St-Zip: CLEARWATER, FL 33765 US

Title: MGRM ( ) Delete  
Name: BLOCH, KORAL  
Address: 901 N HERCULES AVE  
City-St-Zip: CLEARWATER, FL 33765 US

Title: MGRM ( ) Delete  
Name: BLOEK, RICHARD  
Address: 901 N HERCULES AVE  
City-St-Zip: CLEARWATER, FL 33765 US

Title: MGRM ( ) Delete  
Name: HOUVARDAS, TRIFON  
Address: 901 N HERCULES AVE  
City-St-Zip: CLEARWATER, FL 33765 US

Title: MGRM ( ) Delete  
Name: PAPPAS, ATHENA  
Address: 901 N HERCULES AVE  
City-St-Zip: CLEARWATER, FL 33765 US

Title: MGRM ( ) Delete  
Name: ASTRENE, LU  
Address: 901 N HERCULES AVE  
City-St-Zip: CLEARWATER, FL 33765 US

## ADDITIONS/CHANGES:

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

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

Title: MGRM (X) Change ( ) Addition  
Name: BOLEK, RICHARD  
Address: 901 N HERCULES AVE  
City-St-Zip: CLEARWATER, FL 33765 US

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

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

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: GEORGE E PAPPAS

MGRM

04/11/2006

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