## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **FILED** Jan 12, 2006 08:00 AM **DOCUMENT # L04000071970** 1. Entity Name **Secretary of State** CTM INVESTMENTS, LLC Principal Place of Business Mailing Address 1800 S.R. 17 SOUTH 1800 S.R. 17 SOUTH AVON PARK, FL 33825 AVON PARK, FL 33825 01062008 No Cha-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 14-1874173 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WOHL, MARTIN M DO NOT WRITE 1800 S.R. 17 SOUTH AVON PARK, FL 33825 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) Filing Fee is \$50.00 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS 9. MGR IIILE NAME WOHL, MARTIN M 1800 S.R. 17 SOTH STREET ADDRESS AVON PARK, FL 33825 CITY-ST-ZIP U00000382380 TITLE 01/12/06-80008-009 55.00 NAME STREET ADDRESS CITY-ST-7/P TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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.

CICNATURE

STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

