


**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 16, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L04000074412</b> 1. Entity Name LIONSHARE INVESTMENTS, LLC	
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Principal Place of Business 1005 WEST INDIANTOWN ROAD SUITE 201 JUPITER, FL 33458 US	Mailing Address 1005 WEST INDIANTOWN ROAD SUITE 201 JUPITER, FL 33458 US
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**DO NOT WRITE IN THIS SPACE**



04122007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-1876717	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DEPINTO, WENDY K  
1005 WEST INDIANTOWN ROAD  
SUITE 201  
JUPITER, FL 33458

**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

**Filing Fee is \$50.00  
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DEPINTO, WENDY K 1005 WEST INDIANTOWN ROAD, SUITE 201 JUPITER, FL 33458
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEM DEPINTO, GREGG V 1005 WEST INDIANTOWN ROAD, SUITE 201 JUPITER, FL 33458
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04/26/07-80038-003 55.00

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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: Wendy K. Depinto, MGRM WENDY K. DEPINTO 4/12/07 (561) 744-3495  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #