


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 09, 2007 08:00 AM
Secretary of State

DOCUMENT # L04000074493 1. Entity Name FLORIDA PCF INVESTMENTS, LLC	
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Principal Place of Business 431 CHAMPAGNE CIRCLE PORT ORANGE, FL 32127	Mailing Address 431 CHAMPAGNE CIRCLE PORT ORANGE, FL 32127
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DO NOT WRITE IN THIS SPACE



03062007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-1776230	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

TODD, EDWARD M
431 CHAMPAGNE CIRCLE
PORT ORANGE, FL 32127

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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 _____ (NOTE: Registered Agent signature required when reinstating)

Signature, typed or printed name of registered agent and title if applicable DATE

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GOEPFERT, SHAWN 2251 BRIAN AVENUE DAYTONA BEACH, FL 32119
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HALL, ROBERT 5889 SOUTH WILLIAMSON BOULEVARD PORT ORANGE, FL 32124
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PARKER, CLINT 1681 TOWN PARK DRIVE PORT ORANGE, FL 32129
TITLE NAME STREET ADDRESS CITY-ST-ZIP	GP TODD, EDWARD 431 CHAMPAGNE CIRCLE PORT ORANGE, FL 32127
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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03/20/07-80010-022 50.00

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: Edward M. Todd 3/7/07 386-405-3159

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #