


**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 18, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # L04000083044**

1. Entity Name  
**INVESTMENTS, LLC**



Principal Place of Business <b>985 EASTHAM WAY          UNIT 101          NAPLES, FL 34104 US</b>	Mailing Address <b>985 EASTHAM WAY          UNIT 101          NAPLES, FL 34104 US</b>
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**DO NOT WRITE IN THIS SPACE**



04162008 No Chg-LLC CR2E083 (12/07)

4. FEI Number <b>81-0658803</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**MILLER, RAYMOND R SR  
 985 EAST HAM WAY D-101  
 NAPLES, FL 34104**

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MILLER, RAYMOND R SR 985 EASTHAM WAY D101 NAPLES, FL 34104
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CHARLES, GARTNER 973 HINGHAM WAY 103 NAPLES, FL 34104
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00000907426  
 05/05/08-80037-024 138.75

**DO NOT WRITE IN THIS SPACE**

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:** Raymond R. Miller Sr. Raymond R. Miller Sr. 4/16/08 239-352-7163

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