

**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  
985 EASTHAM WAY  
UNIT 101  
NAPLES, FL 34104 US

Mailing Address  
985 EASTHAM WAY  
UNIT 101  
NAPLES, FL 34104 US



04162008 No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
81-0658803

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** 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 \_\_\_\_\_

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

(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

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE  
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NAME  
STREET ADDRESS  
CITY- ST- ZIP

000000907426  
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 #