## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000083714

City-St-Zip:

MIMS, FL 32754

Entity Name: ARI INVESTMENTS L.L.C.

FILED Jan 13, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3660 N US 1 MIMS, FL 32754 **Current Mailing Address: New Mailing Address:** P.O. BOX 765 MIMS, FL 32754 FEI Number: 59-3540255 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ANDERSON, ERIC A 3660 N US 1 MIMS, FL 32754 US 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. SIGNATURE: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM ( ) Delete Title: () Change () Addition ANDERSON, ROBERT J Name: Name: Address: 3660 N US 1 Address: City-St-Zip: MIMS, FL 32754 City-St-Zip: Title: MGRM ( ) Delete Title: () Change () Addition ANDERSON, WILLIAM R Name: Name: Address: 3660 N US 1 Address: City-St-Zip: MIMS, FL 32754 City-St-Zip: Title: MGRM ( ) Delete Title: () Change () Addition ANDERSON, ERIC A Name: Name: Address: 3660 N US 1 Address: City-St-Zip: MIMS, FL 32754 City-St-Zip: ( ) Delete Title: MGRM Title: () Change () Addition Name: ANDERSON, JOHN M Name: Address: 3660 N US 1 Address:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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.

City-St-Zip:

SIGNATURE: ERIC A ANDERSON MGRM 01/13/2006