

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000086824

FILED
Aug 16, 2007
Secretary of State

Entity Name: BOSS INVESTMENTS I, L.L.C.

Current Principal Place of Business:

211 PALMETTO ROAD
GULF BREEZE, FL 32561

New Principal Place of Business:

Current Mailing Address:

211 PALMETTO ROAD
GULF BREEZE, FL 32561

New Mailing Address:

FEI Number: 20-1913937 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

OVERBAUGH, ALAN N DR.
211 PALMETTO ROAD
GULF BREEZE, FL 32561 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:

Title: MGRM () Delete
Name: GULF COAST INVESTMEN, TS, L.L.C.
Address: 211 PALMETTO ROAD
City-St-Zip: GULF BREEZE, FL 32561

Title: MGRM () Delete
Name: BLUNDELL, JACK W
Address: 308 TWISTED OAK DRIVE
City-St-Zip: CANTONMENT, FL 32533

Title: MGRM () Delete
Name: BLUNDELL, TAMMY K
Address: 308 TWISTED OAK DRIVE
City-St-Zip: CANTONMENT, FL 32533

Title: MGRM () Delete
Name: SCHROTH, ELLEN S
Address: P.O. BOX 221
City-St-Zip: GULF BREEZE, FL 32562

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: DR. ALAN N. OVERBAUGH

MGRM

08/16/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date