

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 09, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000090439

1. Entity Name
XS INVESTMENTS LLC



Principal Place of Business
5051 SE GREAT POCKET TRAIL
STUART, FL 34997

Mailing Address
5051 SE GREAT POCKET TRAIL
STUART, FL 34997



01052006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-2018470

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

GEARIN, JOHN
5051 SE GREAT POCKET TRAIL
STUART, FL 34997

**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

Filing Fee is \$50.00
Due by May 1, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	SPOONER, LEN
STREET ADDRESS	38955 CHAPARRAL DRIVE
CITY-ST-ZIP	TEMECULA, CA 92592
TITLE	MGRM
NAME	PEARSON, GREGG
STREET ADDRESS	1533 SW URBINO AVENUE
CITY-ST-ZIP	PORT ST. LUCIE, FL 34953
TITLE	MGRM
NAME	GEARIN, JOHN
STREET ADDRESS	5051 SE GREAT POCKET TRAIL
CITY-ST-ZIP	STUART, FL 34997

000001480137
01/10/06-80046-002 \$0.00

**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