

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000090799

Entity Name: ELLAMAE INVESTMENTS, LLC

FILED
Jul 11, 2007
Secretary of State

Current Principal Place of Business:

5840 W. 25TH AVE.
EDGEWATER, CO 80214

New Principal Place of Business:

Current Mailing Address:

5840 W. 25TH AVE.
EDGEWATER, CO 80214

New Mailing Address:

PO BOX 147055
EDGEWATER, CO 80214

FEI Number: 51-0535993 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

DAMIAN, COOK
1794 ROGERO RD
1002
JACKSONVILLE, FL 32211 US

Name and Address of New Registered Agent:

COOK, DAMIAN
1794 ROGERO RD
1002
JACKSONVILLE, FL 32211 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: DAMIAN COOK

07/11/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FITZSIMMONS, ABRAHAM D
Address: 5840 W. 25TH AVE.
City-St-Zip: EDGEWATER, CO 80214 US

Title: MGRM (X) Delete
Name: ROUSH, JOHN E
Address: 5840 W. 25TH AVE.
City-St-Zip: EDGEWATER, CO 80214 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: FITZSIMMONS, ABRAHAM D
Address: PO BOX 147055
City-St-Zip: EDGEWATER, CO 80214 US

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: ABRHAM FITZSIMMONS

MGRM

07/11/2007

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