

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**Jan 20, 2006 08:00 AM
Secretary of State**

DOCUMENT # L04000093980

1. Entity Name

GRAHAM FAMILY INVESTMENTS, LLC



Principal Place of Business

**680 CANAL COURT
SATELLITE BEACH, FL 32937**

Mailing Address

**680 CANAL COURT
SATELLITE BEACH, FL 32937**



01162006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

20-2088088

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**KREER, JAMES R
680 CANAL COURT
SATELLITE BEACH, FL 32937**

**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
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
KREER, JAMES R
680 CANAL COURT
SATELLITE BEACH, FL 32937**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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01/25/06-80004-011 \$0.00

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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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1/17/06

Date

321-779-9438

Daytime Phone #