

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000000475

FILED
Mar 15, 2007
Secretary of State

Entity Name: USPOA INVESTMENTS, LLC

Current Principal Place of Business:

5200 NW 43RD STREET, SUITE 102-343
GAINESVILLE, FL 326064482

New Principal Place of Business:

5200 NW 43RD STREET
SUITE 102-342
GAINESVILLE, FL 326064482

Current Mailing Address:

5200 NW 43RD STREET, SUITE 102-343
GAINESVILLE, FL 326064482

New Mailing Address:

5200 NW 43RD STREET
SUITE 102-342
GAINESVILLE, FL 326064482

FEI Number: 20-2278317

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZEBEDEE, RONALD H
5200 NW 43RD STREET, SUITE 102-343
GAINESVILLE, FL 326064482 US

Name and Address of New Registered Agent:

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: ZEBEDEE, JOHN A
Address: P.O. BOX 990
City-St-Zip: ST. THOMAS, VIRGIN ISLANDS,

Title: MGRM () Delete
Name: ZEBEDEE, RONALD H
Address: 5200 NW 43RD STREET, SUITE 102-343
City-St-Zip: GAINESVILLE, FL 326064482

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: ZEBEDEE, RONALD H
Address: 5200 NW 43RD STREET, SUITE 102-342
City-St-Zip: GAINESVILLE, FL 326064482

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.

SIGNATURE: RONALD ZEBEDEE

MGRM

03/15/2007

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