2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000003333

Address: City-St-Zip:

Entity Name: INDIAN RIVER INVESTMENT COMPANY, LLC

FILED Feb 07, 2008 Secretary of State

0 (D:::ID) (D::			New Britania I Black of Business		
Current Principal Place of Business:			New Principal	New Principal Place of Business:	
2400 NE INDIAN RIVER DR JENSEN BEACH, FL 34957			614 CEDAR SIDE CIRCLE NE PALM BAY, FL 32905		
Current Mailing Address:			New Mailing Address:		
614 CEDAR SIDE CIR NE PALM BAY, FL 32905			614 CEDAR SIDE CIRCLE NE PALM BAY, FL 32905		
FEI Number	: 20-2289975	FEI Number Applied For()	FEI Number Not Applicable	() Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Add	ress of New Registered Agent:	
614 CEDA PALM BAY	.,	US	ourpose of changing its reg	gistered office or registered agent, or both	
	e of Florida.		, , ,	,	
SIGNATU	RE:				
	Electroni	c Signature of Registered Ag	ent	Date	
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	MGRM () MORROW, W 2400 NE INDIAN JENSEN BEACH		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	MGRM () NEHEZ, S 2400 NE INDIAN JENSEN BEACH		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	MGRM () NEHEZ, R 2400 NE INDIAN JENSEN BEACH		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	MGRM () MORROW, C 2400 NE INDIAN JENSEN BEACH		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name:	()	Delete	Title: MGF Name: MAX	RM () Change (X) Addition WELL-WHEELER, L M	

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.

Address:

City-St-Zip:

614 CEDAR SIDE CIRCLE NE

PALM BAY, FL 32905

SIGNATURE: B MORROW MGRM 02/07/2008