

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 10, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000015894

1. Entity Name
TARPON SPRINGS INVESTMENTS, LLC



Principal Place of Business
518 S PINELLAS AVE
TARPON SPRINGS, FL 34689

Mailing Address
518 S PINELLAS AVE
TARPON SPRINGS, FL 34689



07032007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 54-2166966	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HILDERBRAND, GAYLEN K
1002 MARSH VIEW LANE
TARPON SPRINGS, FL 34689

**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 Gaylen Hilderbrand Gaylen Hilderbrand
Signature, typed or printed name of Registered Agent and fee if applicable (NOTE: Registered Agent signature required when reinstating)

DATE 7-3-07

**Filing Fee is \$50.00
Due by September 14, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM HILDERBRAND, JULIA 1002 MARSH VIEW LANE TARPON SPRINGS, FL 34689
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07/10/07-80014-006 50.00

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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: Julia Hilderbrand Julia Hilderbrand 7-3-07 727-485-8195
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #