


**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 26, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L05000037063</b> 1. Entity Name CORE SEVEN INVESTMENTS, L.L.C.	
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Principal Place of Business 4030 SOUTH PIPKIN ROAD LAKELAND, FL 33811	Mailing Address 4030 SOUTH PIPKIN ROAD LAKELAND, FL 33811
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**DO NOT WRITE IN THIS SPACE**



04182007No Chg-LLC

CR2E083 (11/05)

4. FEI Number  
20-2687918

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

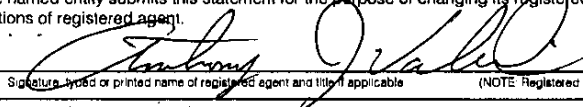
**6. Name and Address of Current Registered Agent**

VALENTI, ANTHONY  
4030 SOUTH PIPKIN ROAD  
LAKELAND, FL 33811

**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)

4-23-07

DATE

**Filing Fee is \$50.00**  
**Due by May 1, 2007**

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

MGRM  
VALENTI, ANTHONY  
4030 SOUTH PIPKIN ROAD  
LAKELAND, FL 33811

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
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STREET ADDRESS  
CITY-ST-ZIP

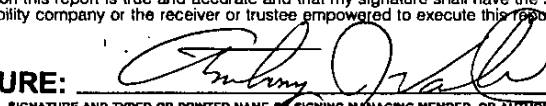
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

U000000735400  
05/10/07-80032-006 50.00

**DO NOT WRITE  
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

4-23-07

Date

863-370-1099

Daytime Phone #