2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

1. Entity Name LITTLE BIT INVESTMENTS, LLC



FILED Feb 22, 2007 08:00 A Secretary of State

Principal Place of Business

P.O. BOX 7461 LAKELAND, FL 33807 Mailing Address P.O. BOX 7461 LAKELAND, FL 33807



02192007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number Applied For 42-1666425 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent

ANDERSON, J.A.

NOT WOITE

| 4552 HOLDER CT LAKELAND, FL 33813 | | | IN THIS SPACE | |
|--|--|--|--|--|
| 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 aignature required when reinstating) | DATE | |
| Filing Fee is \$50.00 Due by May 1, 2007 | | | | |
| 9. | MANAGING MEMBERS/MANAGERS | | ************************************** | |
| NAME STREET ADDRESS CITY-ST-ZIP | MGR ANDERSON, J A P.O. BOX 7461 LAKELAND, FL 33807 | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | U00000644712 03/02/07-80055-013 50.00 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | DO | NOT WRITE | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | |
| 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 infor | | | | |

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 manage limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

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

2/19/07