

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000040680

**FILED**  
**Mar 08, 2012**  
**Secretary of State**

**Entity Name:** INVESTMENT PARTNERS, LLC

**Current Principal Place of Business:**

906 ALOMA FAYE LANE  
FORT WALTON BEACH, FL 32547

**New Principal Place of Business:**

**Current Mailing Address:**

906 ALOMA FAYE LANE  
FORT WALTON BEACH, FL 32547

**New Mailing Address:**

8901 SCHOONER CT  
NAVARRE, FL 32566 US

**FEI Number:** 20-2774988

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BEDSOLE, GLENN J  
906 ALOMA FAYE LANE  
FORT WALTON BEACH, FL 32547 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:** MGR  
**Name:** BEDSOLE, GLENN J  
**Address:** 906 ALOMA FAYE LANE  
**City-St-Zip:** FORT WALTON BEACH, FL 32547

**Title:** MGR  
**Name:** BEDSOLE, MICHAEL G  
**Address:** 324 SAILFISH CIR  
**City-St-Zip:** DESTIN, FL 32541

**Title:** MGR  
**Name:** BURDA, JAMES E  
**Address:** 8901 SCHOONER COURT  
**City-St-Zip:** NAVARRE, FL 32566

**Title:** MGR  
**Name:** BURDA, BRIAN J  
**Address:** 8901 SCHOONER COURT  
**City-St-Zip:** NAVARRE, FL 32566

I hereby 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:** JAMES E. BURDA

MGR

03/08/2012

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