


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 09, 2007 8:00 am
Secretary of State

05-09-2007 90034 036 ****55.00

DOCUMENT # L05000057885		
1. Entity Name PILGRIM INVESTMENTS, LLC		
Principal Place of Business 527 Captains Rd. 10223 ALLAMANDA BLVD. PALM BEACH GARDENS, FL 33410-08 North Palm Beach	Mailing Address 527 Captains Road 10223 ALLAMANDA BLVD. PALM BEACH GARDENS, FL 33410-08 North Palm Beach	

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04152007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 84-1682819	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 PERRY, JUDITH Jennifer Hyland 10223 ALLAMANDA BLVD. 527 Captains Rd. PALM BEACH GARDENS, FL 33410-08 North Palm Beach

**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 *Jennifer Hyland*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S PERRY, JUDITH P.O. Box 680957 10223 ALLAMANDA BLVD Park City, UT 84068 PALM BEACH GARDENS, FL 33410
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP MILLNER, DAN 12205 CAPTAINS LANDING NORTH PALM BEACH, FL 33408
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P HYLAND, JENNIFER 527 CAPTAINS RD NORTH PALM BEACH, FL 33408
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T MILLNER, REGINA D 12205 CAPTAINS LANDING NORTH PALM BEACH, FL 33408
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**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: *Jennifer Hyland*