


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Aug 14, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000075090 1. Entity Name PAUL DAVID INVESTMENTS, LLC	
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Principal Place of Business P.O. BOX 940311 MAITLAND, FL 32794-0311	Mailing Address P.O. BOX 940311 MAITLAND, FL 32794-0311
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08082007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-3237178	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent CHIARO, P.DAVID JR 311 OAK HILL DR. ALTAMONTE SPRINGS, FL 32701

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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 _____ (NOTE: Registered Agent signature required when restate) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR CHIARO, PAUL D P.O. BOX 940311 MAITLAND, FL 327940311
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR CHIARO, PAUL D JR 311 OAK HILL DR ALTAMONTE SPRINGS, FL 32701
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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:  **8 Aug 2007** **407-331-1779**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Daytime Phone #