


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 23, 2007 8:00 am
Secretary of State

05-23-2007 90215 041 ****50.00

DOCUMENT # L05000098343 1. Entity Name LC INVESTMENTS, LLC					
Principal Place of Business 4138 PACE ROAD PACE, FL 32571 SR			Mailing Address 4138 PACE ROAD PACE, FL 32571 SR		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip Country		City & State Zip Country		4. FEI Number 20-4754861	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required		Applied For <input type="checkbox"/> Not Applicable			
6. Name and Address of Current Registered Agent KING, L T 4138 PACE ROAD PACE, FL 32571					
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code					
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$50.00 Due by September 14, 2007		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR KING, CONNIE A 4138 PACE ROAD PACE, FL 32571	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR Lawrence T. King 4138 Pace Road Pace, FL 32571	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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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: <u>Lawrence T. King</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>			5-21-07 850-994-0213 <small>Date Daytime Phone #</small>		

40118121



05172007 Chg-LLC CR2E083 (12/06)

ATTACHMENT

JD&CO

JOHN DUCKER & COMPANY

ACCOUNTANTS & TAX CONSULTANTS

Since 1975

6825 OAK STREET
P.O. BOX 889
MILTON, FL 32572

Phone: (850) 623-3250

(800) 978-7530

Fax: (850) 626-9602

TO: LC Investments, LLC

DATE: May 18, 2007

2007 UNIFORM BUSINESS REPORT

XX Please sign and print your name, date, and provide a daytime telephone number on line 11.


XX Make a check payable to **Florida Department of State** for **\$50.00** and enclose along with the return in the provided envelope on or before **September 14, 2007**.

ATTACHMENT

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

CLIENT COPY

40118127

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