

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000104317

Entity Name: SGI INVESTMENTS, LLC

FILED
Apr 30, 2007
Secretary of State

Current Principal Place of Business:

2602 LUCERNE DRIVE
TALLAHASSEE, FL 32303

New Principal Place of Business:

7113 ANGLEWOOD LANE
TALLAHASSEE, FL 32309

Current Mailing Address:

2602 LUCERNE DRIVE
TALLAHASSEE, FL 32303

New Mailing Address:

7113 ANGLEWOOD LANE
TALLAHASSEE, FL 32309

FEI Number: 20-3660715

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEARSON, KATIE
2602 LUCERNE DRIVE
TALLAHASSEE, FL 32303 US

Name and Address of New Registered Agent:

MASON, RONALD N JR
7113 ANGLEWOOD LANE
TALLAHASSEE, FL 32309 US

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: RONALD N MASON JR

04/30/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PEARSON, KATHERINE
Address: 2602 LUCERNE DRIVE
City-St-Zip: TALLAHASSEE, FL 32303

Title: MGRM () Delete
Name: PEARSON, BRIAN
Address: 2602 LUCERNE DRIVE
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MASON, RONALD N JR
Address: 7113 ANGLEWOOD LANE
City-St-Zip: TALLAHASSEE, FL 32309

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: RONALD N MASON JR

MGMR

04/30/2007

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