

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

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

|                                                                                   |                                                                       |
|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------|
| <b>DOCUMENT # L05000109181</b>                                                    |                                                                       |
| 1. Entity Name<br><b>CHIKUITA INVESTMENTS, LLC</b>                                |                                                                       |
|  |                                                                       |
| Principal Place of Business<br><b>5501 CHIKUITA BLVD<br/>CAPE CORAL, FL 33914</b> | Mailing Address<br><b>5501 CHIKUITA BLVD<br/>CAPE CORAL, FL 33914</b> |



07122007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

|                                    |                               |
|------------------------------------|-------------------------------|
| 4. FEI Number<br><b>20-4004135</b> | Applied For<br>Not Applicable |
|------------------------------------|-------------------------------|

|                                                           |                                          |
|-----------------------------------------------------------|------------------------------------------|
| 5. Certificate of Status Desired <input type="checkbox"/> | <b>\$5.00</b> Additional<br>Fee Required |
|-----------------------------------------------------------|------------------------------------------|

**6. Name and Address of Current Registered Agent**

**GATELY, JEFFREY  
1805 PICCADILLY CIR  
CAPE CORAL, FL 33991**

**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 \_\_\_\_\_

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 September 14, 2007.**

**9. MANAGING MEMBERS/MANAGERS**

|                                                |                                                                             |
|------------------------------------------------|-----------------------------------------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | MGRM<br>GATELY, JEFFREY S<br>1805 PICCADILLY CIRCLE<br>CAPE CORAL, FL 33991 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | MGRM<br>JOHNSON, TODD<br>2389 PINWOODS CIRCLE<br>NAPLES, FL 34105           |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                             |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                             |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                             |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                             |

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08/14/07-80002-025 50.00

**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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

8-9-07

239-542-0200