


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

5. **FILED**
Jun 06, 2006 8:00 am
Secretary of State

05-04-2006 90021 016 ****50.00

DOCUMENT # L05000120243 1. Entity Name SERVANT INVESTMENTS FUND (MICHIGAN RIBS), LLC																													
Principal Place of Business 135 WEST CENTRAL BLVD., SUITE 120 ORLANDO, FL 32801			Mailing Address 135 WEST CENTRAL BLVD., SUITE 120 ORLANDO, FL 32801																										
2. Principal Place of Business		3. Mailing Address																											
Suite, Apt. #, etc.		Suite, Apt. #, etc.																											
City & State		City & State																											
Zip	Country	Zip	Country																										
6. Name and Address of Current Registered Agent GRAY, N. DWAYNE JR. C/O GREENSPOON MARDER, P.A. 201 EAST PINE STREET, SUITE 500 ORLANDO, FL 32801				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 _____ (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. DATE _____																													
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State																											
9. MANAGING MEMBERS/MANAGERS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; padding: 2px;">TITLE</td> <td style="width:65%; padding: 2px;">MGR</td> <td style="width:20%; padding: 2px; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;">SERVANT INVESTMENTS, LLC</td> <td></td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;">135 WEST CENTRAL BLVD., SUITE 120</td> <td></td> </tr> <tr> <td style="padding: 2px;">CITY - ST - ZIP</td> <td style="padding: 2px;">ORLANDO, FL 32801</td> <td></td> </tr> </table>			TITLE	MGR	<input type="checkbox"/> Delete	NAME	SERVANT INVESTMENTS, LLC		STREET ADDRESS	135 WEST CENTRAL BLVD., SUITE 120		CITY - ST - ZIP	ORLANDO, FL 32801		10. ADDITIONS/CHANGES <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; padding: 2px;">TITLE</td> <td style="width:65%; padding: 2px;"></td> <td style="width:20%; padding: 2px; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;"></td> <td></td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;"></td> <td></td> </tr> <tr> <td style="padding: 2px;">CITY - ST - ZIP</td> <td style="padding: 2px;"></td> <td></td> </tr> </table>			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY - ST - ZIP		
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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: N. Dwayne Gray Jr. N-DWAYNE GRAY JR.
 4/28/06 408-435-6559
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, SECRETARY OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #