

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000005569

FILED
Apr 28, 2008
Secretary of State

Entity Name: RELATIVE INVESTMENTS LLC

Current Principal Place of Business:

8007 ACADIA ESTATES COURT
KISSIMMEE, FL 34747

New Principal Place of Business:

Current Mailing Address:

7835 SKIING WAY
WINTER GARDEN, FL 34787

New Mailing Address:

FEI Number: 20-4582900

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TROVER, SUSAN K
7835 SKIING WAY
WINTER GARDEN, FL 34787 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: TROVER, SUSAN K
Address: 7835 SKIING WAY
City-St-Zip: WINTER GARDEN, FL 34787

Title: MGRM () Delete
Name: TROVER, PHILIP I
Address: 7835 SKIING WAY
City-St-Zip: WINTER GARDEN, FL 34787

Title: MGMR () Delete
Name: STEDMAN, RONALD J
Address: #3 MANNHEIM CIRCLE
City-St-Zip: MILLSTADT, IL 62260

Title: MGRM () Delete
Name: STEDMAN, SHARON K
Address: #3 MANNHEIM CIRCLE
City-St-Zip: MILLSTADT, IL 62260

Title: MGRM () Delete
Name: STEDMAN, RANDY J
Address: #3 MANNHEIM CIRCLE
City-St-Zip: MILLSTADT, IL 62260

Title: MGRM () Delete
Name: STEDMAN, KELLY
Address: #3 MANNHEIM CIRCLE
City-St-Zip: MILLSTADT, IL 62260

ADDITIONS/CHANGES:

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

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

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

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

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

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: SUSAN K TROVER

PRES

04/28/2008

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