2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2007
Secretary of State

DOCUMENT# L06000035601

Entity Name: 5 STAR INVESTMENTS, LLC

Current Principal Place of Business:

PO BOX 211003
ROYAL PALM BEACH, FL 33421 US

New Principal Place of Business:

900 SOUTH MAIN STREET
BELLE GLADE, FL 33421 US

Current Mailing Address:

PO BOX 211003
ROYAL PALM BEACH, FL 33421 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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:	MGRM	( ) Delete
Name:	PAYNE, EMORY	
Address:	PO BOX 211003	
City-St-Zip:	ROYAL PALM BEACH, FL 33421 US	
Title:	MGRM	( ) Delete
Name:	JACKSON, JEFFREY	
Address:	PO BOX 211003	
City-St-Zip:	ROYAL PALM BEACH, FL 33421 US	
Title:	MGRM	( ) Delete
Name:	LEONARD, DARRYL	
Address:	PO BOX 211003	
City-St-Zip:	ROYAL PALM BEACH, FL 33421 US	
Title:	MGRM	( ) Delete
Name:	GIVANS, ANDRAE A	
Address:	PO BOX 211003	
City-St-Zip:	ROYAL PALM BEACH, FL 33421 US	
Title:	MGRM	( ) Delete
Name:	WILLIAMS, WILLIAM S	
Address:	PO BOX 211003	
City-St-Zip:	ROYAL PALM BEACH, FL 33421 US	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
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: EMORY E. PAYNE MR 04/30/2007

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