

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000036304

FILED
May 09, 2007
Secretary of State

Entity Name: INGILL INVESTMENTS, LLC

Current Principal Place of Business:

1226 NORTHERN WAY
WINTER SPRINGS, FL 32708

New Principal Place of Business:

Current Mailing Address:

1226 NORTHERN WAY
WINTER SPRINGS, FL 32708

New Mailing Address:

FEI Number: 65-1273671 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

GILLIARD, ALLAN M
1625 STARGAZER TERRACE
SANFORD, FL 32771 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GILLIARD, ALLAN
Address: 1625 STARGAZER TERRACE
City-St-Zip: SANFORD, FL 32771 US

Title: MGRM () Delete
Name: GILLIARD, SHANNON
Address: 1625 STARGAZER TERRACE
City-St-Zip: SANFORD, FL 32771 US

Title: MGRM () Delete
Name: INGRIA, JOANNA
Address: 1226 NORTHERN WAY
City-St-Zip: WINTER SPRINGS, FL 32708 US

Title: MGRM () Delete
Name: INGRIA, ANTHONY
Address: 1226 NORTHERN WAY
City-St-Zip: WINTER SPRINGS, FL 32708 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:

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: ALLAN GILLIARD

MGRM

05/09/2007

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