

**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 28, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # L06000051762**

1. Entity Name  
**LUNDIN INVESTMENTS, LLC**



Principal Place of Business  
**9523 WILSHIRE LAKES BLVD.  
 NAPLES, FL 34109**

Mailing Address  
**9523 WILSHIRE LAKES BLVD.  
 NAPLES, FL 34109**

**DO NOT WRITE IN THIS SPACE**



04242008 No Chg-LLC CR2E083 (12/07)

|   |                                       |
|---|---------------------------------------|
| 4. FEI Number<br><b>14-1966478</b>                        | Applied For<br>Not Applicable         |
| 5. Certificate of Status Desired <input type="checkbox"/> | <b>\$5.00</b> Additional Fee Required |

6. Name and Address of Current Registered Agent

**CORPORATE CREATIONS NETWORK INC.  
 11380 PROSPERITY FARMS ROAD #221E  
 PALM BEACH GARDENS, FL 33410**

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$338.75**

| 9. MANAGING MEMBERS/MANAGERS                   |  |
|--|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>MGR<br/>LUNDIN, KATHLEEN M<br/>9523 WILSHIRE LAKES BLVD.<br/>NAPLES, FL 34109</b> |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |

U00000930514  
 05/21/08-80112-018 143.75

**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: Kathleen M. Lundin, V. Pres.** **4/24/08** **239-597-0303**

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #