

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)


**FILED**  
**Mar 12, 2007 8:00 am**  
**Secretary of State**

02-16-2007 90183 048 \*\*\*\*50.00

30002110



1st MOORE CR2E083 (10/06)

<b>DOCUMENT # L06000054986</b>					
1. Entity Name <b>SUWANNEE AG INVESTMENTS, LLC</b>					
Principal Place of Business <b>610 PINE AVENUE SW LIVE OAK FL 32064 US</b>			Mailing Address <b>POST OFFICE BOX 864 LIVE OAK FL 32064--086 US</b>		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number <b>20-4948140</b>	
				Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>PAPAPETROU, DEAN 610 PINE AVENUE SW LIVE OAK FL 32064</b>				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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering)</small> DATE _____					
<b>FILE NOW!!! FEE IS \$50.00</b> <b>Make Check Payable to Florida Department of State</b> <b>Due By May 1, 2007</b>					
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY ST ZIP	MGRM PAPAPETROU, DEAN 610 PINE AVENUE SW LIVE OAK FL 32064	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY ST ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: _____			Date: <b>2/6/07</b> (316) 208-9314		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>			<small>Date</small>		

**ATTACHMENT**

~~30002116  
#206000654986~~

**SUWANNEE AG INVESTMENTS, LLC**

Live Oak, Florida

Thursday, March 8, 2007

Division of Corporations  
Florida Department of State  
Post Office Box 6478  
Tallahassee, Florida 32314

**RE: 2007 Limited Liability Company Annual Report**


**To Whom It May Concern:**

Please accept this letter as an expression of our appreciation for your assistance in filing the enclosed subject report, as corrected with the inclusion of the LLC's FEIN.

As acknowledged in your letter of February 26, 2007, you are in receipt of our filing fee in the amount of Fifty Dollars (\$50.00).

Should you require any further information, please let me know. In the interim, I remain . . .

**SUWANNEE AG INVESTMENTS, LLC**



**J. Dean Papapetrou  
Managing Member**

JDP:me

Enclosure – as above

Post Office Box 864, Live Oak, Florida 32064-0864  
(386) 208-9864 – Email - [jdpnap@windstream.net](mailto:jdpnap@windstream.net)