

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000077994

Entity Name: SOMERS INVESTMENTS, LLC

FILED  
Aug 08, 2008  
Secretary of State

## Current Principal Place of Business:

13865 VILLAGE CREEK DR  
FORT MYERS, FL 33908

## New Principal Place of Business:

15880 SUMMERLIN RD  
300-126  
FORT MYERS, FL 33908

## Current Mailing Address:

13865 VILLAGE CREEK DR  
FORT MYERS, FL 33908

## New Mailing Address:

15880 SUMMERLIN RD.  
300-126  
FORT MYERS, FL 33908

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

SOMERS, LINDA D  
13865 VILLAGE CREEK DR  
FORT MYERS, FL 33908 US

## Name and Address of New Registered Agent:

SOMERS, LINDA D  
14508 DOLCE VISTA RD.  
201  
FORT MYERS, FL 33908 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: LINDA D. SOMERS

08/08/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: SOMERS, LINDA D  
Address: 13865 VILLAGE CREEK DR  
City-St-Zip: FORT MYERS, FL 33908

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: SOMERS, LINDA D  
Address: 14508 DOLCE VISTA RD. #201  
City-St-Zip: FORT MYERS, FL 33908

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: LINDA D. SOMERS

MGRM

08/08/2008

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