

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT (AR) - DUE BY MAY 1, 2008**

FILED
Jan 31, 2008 08:00 A
Secretary of State

DOCUMENT # L06000085025

1. Entity Name

PANHANDLE INVESTMENT GROUP, L.L.C.



Principal Place of Business

37 TUPELO AVENUE
FORT WALTON BEACH FL 32548

Mailing Address

37 TUPELO AVENUE
FORT WALTON BEACH FL 32548



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

20-5465505

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

1st MOORE

CR2E083 (10/07)

6. Name and Address of Current Registered Agent

BROWN, THOMAS M
37 TUPELO AVENUE
FORT WALTON BEACH FL 32548

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

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008, Fee Will Be \$538.75
Make Check Payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRP	☐ Delete
NAME	BOYETTE, WAYNE T	
STREET ADDRESS	PO BOX 2095	
CITY- ST- ZIP	FORT WALTON BEACH FL 32549	
TITLE	MGRP	☐ Delete
NAME	RICE, EDWARD E	
STREET ADDRESS	701-A EDGE ST	
CITY- ST- ZIP	FORT WALTON BEACH FL 32547	
TITLE	MGRP	☐ Delete
NAME	VOSBURGH, LESLIE	
STREET ADDRESS	803 SOUTH DR.	
CITY- ST- ZIP	FORT WALTON BEACH FL 32547	
TITLE	MGRP	☐ Delete
NAME	BROWN, THOMAS M	
STREET ADDRESS	37 TUPELO AVENUE	
CITY- ST- ZIP	FORT WALTON BEACH FL 32548	
TITLE	MGRP	☐ Delete
NAME	HOWARD, GARY	
STREET ADDRESS	PO BOX 245	
CITY- ST- ZIP	SHALIMAR FL 32579	
TITLE	MGRP	☐ Delete
NAME	HENDERSON, JAMES H II	
STREET ADDRESS	575 L'OMBRE CIRCLE	
CITY- ST- ZIP	FORT WALTON BEACH FL 32547	

10. ADDITIONS/CHANGES

TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	U000000808466
CITY- ST- ZIP	02/07/08-80049-022 138.75
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

DATE

Display Phone #

Thomas M Brown *Thomas M Brown* 1/25/08 850 244-2026