2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 15, 2009
Secretary of State

DOCUMENT# L06000095629

Entity Name: BOPETE INVESTMENTS LLC

Current Principal Place of Business:

3455 WEST FOREST LAKES DRIVE
SARASOTA, FL 34232

New Principal Place of Business:

Current Mailing Address:

3455 WEST FOREST LAKES DRIVE
SARASOTA, FL 34232

New Mailing Address:

FEI Number: 20-5837256 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JOHNSON, WILLIAM B
3455 WEST FOREST LAKES DRIVE
SARASOTA, FL 34232 US

Name and Address of New Registered Agent:

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:	JOHNSON, WILLIAM B	
Address:	3455 WEST FOREST LAKES DRIVE	
City-St-Zip:	SARASOTA, FL 34232	
Title:	MGRM	( ) Delete
Name:	PETER, ANDREW M	
Address:	204 LAKE AVENUE	
City-St-Zip:	SARASOTA SPRINGS, NY 12866	
Title:	MGRM	( ) Delete
Name:	PETER, DAVID B	
Address:	471 CLIFTON RD NE	
City-St-Zip:	ATLANTA, GA 30307	
Title:	MGRM	( ) Delete
Name:	JOHNSON, HAROLD L	
Address:	3348 OLD OAK DRIVE	
City-St-Zip:	SARASOTA, FL 34239	
Title:	MGRM	( ) Delete
Name:	PETER, WILLIAM H	
Address:	8503 HIGH LARK LN	
City-St-Zip:	KNOXVILLE, TN 37923	
Title:	MGRM	( ) Delete
Name:	PETER, WILLIAM B	
Address:	3347 OLD OAK DRIVE	
City-St-Zip:	SARASOTA, FL 34239	

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:	
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: WILLIAM B JOHNSON MGRM 04/15/2009

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