## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED Apr 03, 2007 8:00 am Secretary of State 04-03-2007 90124 049 \*\*\*\*50.00

DOCUMENT # L06000097551  1. Entity Name IRON SHORE INVESTMENTS, LLC					010.	3 2007 9012		
Principal Place of Business Mailing Address 695 31ST STREET SOUTH 5T. PETERSBURG, FL 33712 ST. PETERSBURG, FL 3371								
2. Principal Place of Busin	ess - No P.O. 8ox #	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03232007 Chg	g-LLC	CR2E083 (12/06	6)	
City & State		City & State		4. FEI Number 20-5665499	400		Applied For	
Zip	Country	Zip	Country	5. Certificate of State	rs Desired	\$5.00 A	Additional	
6. Name	and Address of Current	Registered Agent		7. Name and Addre	ss of New Reg			
TIBBETTS; MICHAE	ı n		Name Ra	aymond T. Faulkner				
695 31ST STREET S ST. PETERSBURG,	SOUTH			dress (P.O. Box Number is No 95 31st. St. S.	(P.O. Box Number is Not Acceptable) 1st, St, S,			
			City St. Pete			FL Zip Ci	ode	
8. The above named entity	cummite this statement for	or the purpose of changing its			e State of Flori			
SIGNATURE Specific types Filling Fee i Due by May	s \$50.00	and 690 if applicable. (NOTE	Registered Agont signatur	e required when reinstating)	Make	-23-07  DATE  check payable to Department of St		
9.	MANAGING MEMBI	ERS/MANAGERS	10.	<u> </u>	ADDITIONS/C	HANGES		
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS	P/T/S Michael D. Tibbetts 695 31st St. S.		Chang	e 🗶 Addition	
Crty-ST-ZIP			CITY-ST-ZIP	St. Petersburg, FL 3:	3712			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	•	☐ Delets	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Emily M Tibbetts 695 31st S. S. St. Petersburg, FL 33	3712	Chang	e X] Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Jessica Lee Tibbetts 695 31st St. S. St. Petersburg, FL 3	3712	Chang	e 💢 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE MAME STREET ADDRESS CITY-ST-ZIP		And the state of t	☐ Chang	e Addition	
ITILE HAME STREET ADDRESS CHTY-ST-ZIP	7	☐ Oclete	NAME STREET ADDRESS CITY-ST-ZIP			☐ Chang	e Addition	
TITLE NAME STREET ADDRESS SITY-ST-ZIP		☐ Delate	TITLE NAME STREET ADDRESS CITY-ST-ZIP		· <u> </u>	☐ Chang	e Addition	
indicated on this repor limited liability compar SIGNATURE: X	a information supplied wit it is true and necurate and ny or the pecelyar or trust	h this filing does not qualify for that my signature shall have to employee this was a signature of the things of	the same legal effect perfort as required b	t as if made under oath; that I y Chapter 608, Florida Statute:	Statutes, I furt am a managir 3.	ng member or mana	2-140	