## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000106313

Entity Name: NO LIMIT INVESTMENTS, LLC

FILED Apr 17, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

34 LAUREL RIDGE BREAK ORMOND BEACH, FL 32174 US

Current Mailing Address: New Mailing Address:

34 LAUREL RIDGE BREAK ORMOND BEACH, FL 32174 US

FEI Number: 20-5867691 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LADE, TERRY S
34 LAUREL RIDGE BREAK

ORMOND BEACH, FL 32174 US ORMOND BEACH, FL 32174 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: 04/17/2007

Electronic Signature of Registered Agent Date

Title:

Name:

Address:

Address:

Title:

City-St-Zip:

## MANAGING MEMBERS/MANAGERS:

itle: MGR () Delete

Name: LADE, TERRY S

Address: 34 LAUREL RIDGE BREAK

City-St-Zip: ORMOND BEACH, FL 32174 US

Title: MGR ( ) Delete

Name: NEWKIRK, HARRY

Address: 1742 JACOBS RD

City-St-Zip: SOUTH DAYTONA, FL 32119 US

Title: MGR () Delete Name: DIGAETANO, JAMES

Address: 1816 FORREST PERSERVE BLVD

City-St-Zip: PORT ORANGE, FL 32128 US

Title: MGR ( ) Delete

SIGNATURE: TERRY S. LADE

 Name:
 CONSTANTINO, STENEN
 Name:

 Address:
 5926 BROKEN BOW LANE
 Address:

 City-St-Zip:
 PORT ORANGE, FL 32127 US
 City-St-Zip:

## ADDITIONS/CHANGES:

MGR (X) Change ( ) Addition

Name: LADE, TERRY S

Address: 180 PINTO LANE

City-St-Zip: ORMOND BEACH, FL 32174 US

Title: ( ) Change ( ) Addition

City-St-Zip:

Title: ( ) Change ( ) Addition Name:

( ) Change ( ) Addition

04/17/2007

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.

I hereby certify that the information supplied with this filing does not qualify for the 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