2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

CITY-ST-ZIP TITLE

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

Secretary of State DOCUMENT # L06000121727 05-28-2008 90178 001 ***693.75 P2P INVESTMENTS, LLC 000070ba Mailing Address Principal Place of Business 40 S. PALAFOX STREET, SUITE 500 PO BOX 940 PENSACOLA, FL 32502 PENSACOLA, FL 32502 04302008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3243261 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent **BEGGS & LANE** DO NOT WRITE 501 COMMENDENCIA STREET PENSACOLA, FL 32502 IN THIS SPACE 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. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. MGR TITLE BRANNEN, DAVID A NAME 405 PALA FOX PL SUITE 50 STREET ADDRESS CITY-ST-ZIP PENSACOLA, FL 32502 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS

FILED

May 28, 2008 8:00 am

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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.

Krannen SIGNATURE: