

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 14, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000122426

1. Entity Name
CPGROUP INVESTMENTS, LLC



Principal Place of Business
426 SW COMMERCE DRIVE, STE 130
LAKE CITY, FL 32025

Mailing Address
PO BOX 3566
LAKE CITY, FL 32056



01102008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-8112472

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00** Additional
Fee Required

6. Name and Address of Current Registered Agent

SPARKS, CHARLES S
426 SW COMMERCE DRIVE, STE 130
LAKE CITY, FL 32025

**DO NOT WRITE
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 _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE

000000783045

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

01/15/08-80099-012 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	SPARKS, CHARLES
STREET ADDRESS	426 SW COMMERCIAL DR STE 130
CITY-ST-ZIP	LAKE CITY, FL 32025

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

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IN THIS SPACE**

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.

SIGNATURE: _____

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

Date

Daytime Phone #