

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000005085

**FILED**  
**Jan 06, 2010**  
**Secretary of State**

**Entity Name:** INNOVATORS INVESTMENT GROUP, LLC

**Current Principal Place of Business:**

2623 CABOT ROAD  
LAND O' LAKES, FL 34639

**New Principal Place of Business:**

**Current Mailing Address:**

2623 CABOT ROAD  
LAND O' LAKES, FL 34639

**New Mailing Address:**

**FEI Number:** 20-8455250

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PITTS,, DANIEL L  
19411 GOLDEN SLIPPER PLACE  
LUTZ, FL 33558 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  
**Name:** WILLIAMS, VIRGIL L JR  
**Address:** 2623 CABOT ROAD  
**City-St-Zip:** LAND O' LAKES, FL 34639

**Title:** MGRM  
**Name:** PITTS, DANIEL L  
**Address:** 19411 GOLDEN SLIPPER PLACE  
**City-St-Zip:** LUTZ, FL 33558

**Title:** MGRM  
**Name:** NELSON, ROBERT D  
**Address:** 19113 CROOKED LANE  
**City-St-Zip:** LUTZ, FL 33548

**Title:** MGRM  
**Name:** PITTS, DANIEL L II  
**Address:** 622 LIGHTSEY LANE  
**City-St-Zip:** LUTZ, FL 33549

I hereby 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:** DANIEL L. PITTS

MGRM

01/06/2010

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