

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000098677

Entity Name: PKE INVESTMENTS, LLC

FILED
May 24, 2008
Secretary of State

Current Principal Place of Business:

5515 SW 35TH WAY
GAINESVILLE, FL 32608

New Principal Place of Business:

Current Mailing Address:

5515 SW 35TH WAY
GAINESVILLE, FL 32608

New Mailing Address:

FEI Number: 26-1140483 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

HENDERSON, KELLY L
5515 SW 35TH WAY
GAINESVILLE, FL FLORIDA 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 () Delete
Name: HENDERSON, KELLY L
Address: 5515 SW 35TH WAY
City-St-Zip: GAINESVILLE, FL 32608

Title: MGRM () Delete
Name: HENDERSON, PEGGY O
Address: 3611 SW 63RD LANE
City-St-Zip: GAINESVILLE, FL 32608

Title: MGRM () Delete
Name: HENDERSON, ERIN E
Address: 3611 SW 63RD LANE
City-St-Zip: GAINESVILLE, FL 32608

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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 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: KELLY L HENDERSON

MGMR

05/24/2008

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