2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L98000003271

1. Entity Name

CPA GROUP INVESTMENT MANAGEMENT, LLC



FILED Jan 10, 2006 08:00 AM Secretary of State

Principal Place of Business

501 W 19TH ST

PANAMA CITY, FL 32405-4632 US

Mailing Address

501 W 19TH ST

PANAMA CITY, FL 32405-4632 US



01032006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 59-3546381 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MARLER, JERRY K 501 W 19TH ST PANAMA CITY, FL 32405-4632

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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.		Honono	DICAD

SIGNATURE.

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

(NOTE Registered Agent signature required when reinstating)

<u> 1711/06-80051-025-50.00</u>

Filing Fee is \$50.00 Due by May 1, 2006

(
9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	MARLER, JERRY K
STREET ADDRESS	501 W 19TH ST
CITY-SI-ZIP	PANAMA CITY, FL 324054632
TITLE	MGRM
NAME	TIPTON, DAVID C
STREET ADDRESS	501 W 19TH ST
CITY-ST-ZIP	PANAMA CITY, FL 324054632
TITLE	MGRM
NAME	CHASTAIN, CURTIS
STREET ADDRESS	501 W 19TH ST
CITY-ST-ZIP	PANAMA CITY, FL 324054632
TITLE	MGRM
NAME	GARNER, JIM
STREET ADDRESS	501 W 19TH ST
CITY-ST-ZIP	PANAMA CITY, FL 324054632
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	· ·
NAME	
STREET ADDRESS	
CITY-ST-ZIP	}

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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:

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

1-9-06 (850)7(A-9491

Daytime Phone 4