


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 18, 2005 08:00 AM
Secretary of State

DOCUMENT # L99000001129
 1. Entity Name
 COLSON INVESTMENTS, LLC



Principal Place of Business Mailing Address
 181 CARICA ROAD 181 CARICA ROAD
 NAPLES, FL 34108 NAPLES, FL 34108



01262005No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3569837	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
 HECKER, SUSAN BARRETT
 WILLIAM, PARKER, HARRISON, DIETZ & GETZEN
 200 SOUTH ORANGE AVENUE
 SARASOTA, FL 34236

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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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

Filing Fee is \$50.00 Due by May 1, 2005

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SLAUGHTER, MYRIAM 181 CARICA ROAD NAPLES, FL 34108
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR COLSON MITCHELL, DANIELLE 98 RUE SYR LA FONTAINE 4000 LIEGE, BELGIUM,
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 02/18/05-80035-003 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 # _____