2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

limited liability company or the

SIGNATURE AND TYPED OF TRIMES N

SIGNATURE:

Apr 12, 2006 8:00 am Secretary of State DOCUMENT # L99000005422 1. Entity Name 04-12-2006 90019 007 ****55.00 CCB INVESTORS ASSETS MANAGEMENT, LLC Principal Place of Business Mailing Address 1320 TIDAL POINTE BLVD. JUPITER FL 33496 77 1320 TIDAL POINTE BLVD. JUPITER FL 3348477 2. Principal Place of Business 3. Mailing Address SAME Same Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E083 (10/05) City & State City & State Applied For 4. FEI Number 65-0943452 AME Not Applicable Country Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BAKER BAKER, CHRIS) (P.O. Box Number is Not Acceptable) 1320 TIDAL POINTE BLVD. Jupiter FL 33460 8. The above name surpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of SIGNATURE .. FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2006 ADDITIONS/CHANGES 9 MANAGING MEMBERS/MANAGERS 10 MANAGING MEMBER BILE MGR TITLE **Change** ☐ Addition CHRIS BAKER NAME BAKER, CHRIS NAME 1320 TIDAL POINTE BOULEVARD STREET ADDRESS STREET ADDRESS 1320 TIDAL POINTE BOULEVARD CITY-ST-ZIP CITY-ST-ZIP JUPITER, FL 33477 JUPITER FL 33477 TITLE Delete TITLE ☐ Change ☐ Addition MGR NAME NAME GULLOTTI, ANGELO STREET ADDRESS STREET ADDRESS 27370 WINDING WAY CITY-ST-ZIP MALIBU CA 90265 CITY-ST-ZIP ☐ Defete TITLE ☐ Change ☐ Addition MGR BAKER WILLIAM A NAME NAME STREET ADDRESS 6473 CLEARBROOK DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-2!P SAUGATUCK MI 49453 TITLE MGR ☐ Delete TITLE Change ■ Addition NAME BAKER, MOLLY A NAME STREET ADDRESS 6473 CLEARBROOK DRIVE STREET ADDRESS CITY-ST-ZIP SAUGATUCK MI 49453 CITY-ST-ZIP TITLE ☐ Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY+ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Offlied with this fring does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information current and that may signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the office Englishment of the properties of th 11. I hereby certify that the information indicated on this report is true and

AGING MEMBER, MANAGER, OR AUTHORIZED REP

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