

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT****FILED**
Apr 30, 2005 08:00 AM
Secretary of State

DOCUMENT # M04000001856 1. Entity Name MDS INVESTMENTS, LLC	
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3100 MT PLEASANT STREET RACINE, WI 53404	3100 MT PLEASANT STREET RACINE, WI 53404
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DO NOT WRITE IN THIS SPACE

04252005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number
39-1655760Applied For
Not Applicable5. Certificate of Status Desired ☐\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent GOLDMAN, ELLEN A ESQ 5801 PELICAN BAY BLVD., STE 300 NAPLES, FL 34108	DO NOT WRITE IN THIS SPACE
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6. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00
Due by May 1, 2005U00000346517
04/30/05-80076-022 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM NAMOWICZ, DAVID 3100 MT PLEASANT ST RACINE, WI 53404
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**DO NOT WRITE
IN THIS SPACE**

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.

DAVID NAMOWICZ, MANAGING MEMBER

SIGNATURE: *David Namowicz*

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

4-24-05

Date

262-639-7800

Daytime Phone #