## 2007 LIMITED LIABILITY COMPANY

## **FILED ANNUAL REPORT** Mar 29, 2007 08:00 AM DOCUMENT # M0400005409 Secretary of State 1. Entity Name SILVER INVESTMENTS, LLC Principal Place of Business Mailing Address 239 CLEAR BROOK TRAIL 239 CLEAR BROOK TRAIL DOUGLASVILLE, GA 30134 DOUGLASVILLE, GA 30134 01032007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-1793943 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RASEY, CAROLYN DO NOT WRITE 99 CIRCLE DRIVE NOKOMIS, FL 34275-1564 IN THIS SPACE 8. The above named entity submits this statement for the purpose of c anging its registered office or registered agont, or both, in the State of Florida. I am familiar with, and accept the obligations of register SIGNATURE annted eaths of registered agent and title if applicable (NOTE: (registor a Agent signature required where renstating) Filing Fee is \$50.00 Due by May 1, 2007 9. MANAGING MEMBERS/MANAGERS MGR HILE NOBLE, CAROL G NAME STREET ADDRESS 239 CLEAR BROOK TRAIL CITY-ST-ZIP DOUGLASVILLE, GA 30134 TITLE NAME COCHRAN, LOUISE B U00000682567 04/05/07-80007-022 50.00 STREET ADDRESS 7910 SOUTH GILES ROAD CITY-ST-ZIP DOUGLASVILLE, GA 30135 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS

11. Thereby 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:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS