

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000001313

FILED
Jan 07, 2008
Secretary of State

Entity Name: FLORIDA INVESTMENT PROPERTIES, L.L.C.

Current Principal Place of Business:

2361 CROSSROADS BLVD
ALBERT LEA, MN 56007

New Principal Place of Business:

1637 WEST MAIN ST
ALBERT LEA, MN 56007

Current Mailing Address:

2361 CROSSROADS BLVD
ALBERT LEA, MN 56007

New Mailing Address:

1637 WEST MAIN ST
ALBERT LEA, MN 56007

FEI Number: 20-5923660

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMPSON, WAYNE A
1517 MIRACLE STRIP PARKWAY UNIT PHJ
FT WALTON BEACH, FL 32548 US

Name and Address of New Registered Agent:

THOMPSON, WAYNE A
1517 MIRACLE STRIP PARKWAY UNIT PH5
FT WALTON BEACH, FL 32548 US

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.

SIGNATURE:

01/07/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: THOMPSON, WAYNE A
Address: 2361 CROSSROADS BLVD
City-St-Zip: ALBERT LEA, MN 56007

Title: MGR () Delete
Name: CORMACK, CRAIG
Address: 6101 S 58TH ST., STE B
City-St-Zip: LINCOLN, NE 68516

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: THOMPSON, WAYNE A
Address: 1637 WEST MAIN ST
City-St-Zip: ALBERT LEA, MN 56007

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: WAYNE A. THOMPSON

MGR

01/07/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date