

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 21, 2008 08:00 A
Secretary of State

DOCUMENT # L04000004082

1. Entity Name
FAITH INVESTORS, LLC



Principal Place of Business
**4670 HEDGEHOG ST
MIDDLEBURG, FL 32068 US**

Mailing Address
**P.O. BOX 1193
MIDDLEBURG, FL 32050 US**



04182008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0496048	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

**RHODES, DARIEN N
4670 HEDGEHOG ST
MIDDLEBURG, FL 32068**

**DO NOT WRITE
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75

After May 1, 2008 Fee will be \$538.75

000000908036
05/06/08-80015-007 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	RHODES, DARIEN N MGR
STREET ADDRESS	4670 HEDGEHOG ST
CITY - ST - ZIP	MIDDLEBURG, FL 32068

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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CITY - ST - ZIP	

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IN THIS SPACE**

11. I hereby 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:

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

Date

Daytime Phone #

4/18/08 904.291.8282