

**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Jan 17, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # L01000003204

1. Entity Name  
 123 GROUP, L.L.C.



Principal Place of Business  
 125 E. INDIANA AVE., STE. A-2  
 DELAND, FL 32724

Mailing Address  
 125 E. INDIANA AVE., STE. A-2  
 DELAND, FL 32724



01042006No Chg-LLC CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-3703353 Applied For Not Applicable

5. Certificate of Status Desired  \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MCMAHAN, RICHARD A  
 125 E. INDIANA AVE., STE. A-2  
 DELAND, FL 32724

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$50.00 Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	MCMAHAN, RICHARD A
STREET ADDRESS	125 E. INDIANA AVE., STE. A-2
CITY-ST-ZIP	DELAND, FL 32724
TITLE	MGR
NAME	KELLOGG, W. ROBERT
STREET ADDRESS	P.O. BOX 223
CITY-ST-ZIP	DELAND, FL 327210223
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000389108  
 01/20/06-80032-002 50.00

**DO NOT WRITE 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: Richard A. McMahan 1/17/06 386-736-3799  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

RICHARD A. MCMAHAN