

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000001679

FILED
Apr 11, 2006
Secretary of State

Entity Name: INTEGRAL CAPITAL GROUP, LLC

Current Principal Place of Business:

67 WALL ST.
21ST FLR
NEW YORK, NY 10005

New Principal Place of Business:

Current Mailing Address:

67 WALL ST.
21ST FLR
NEW YORK, NY 10005

New Mailing Address:

FEI Number: 22-3643480 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLUMBERGEXCELSIOR CORPORATE SERVICES, INC.
4435 OLD WINTER GARDEN ROAD
ORLANDO, FL 32811 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LIU, LOUISE
Address: 67 WALL ST. 21ST FLR
City-St-Zip: NEW YORK, NY 10005

Title: MGRM () Delete
Name: CAMMANTA, JOSEPH A
Address: 67 WALL ST. 21ST FLR
City-St-Zip: NEW YORK, NY 10005

Title: MGRM () Delete
Name: LU, DAVID
Address: 67 WALL ST. 21ST FLR
City-St-Zip: NEW YORK, NY 10005

Title: MGRM () Delete
Name: WALSH, BRIAN F
Address: 67 WALL ST. 21ST FLR
City-St-Zip: NEW YORK, NY 10005

Title: MGRM () Delete
Name: WALSH, JOSEPH W
Address: 512 BAYVIEW ST.
City-St-Zip: DESTIN, FL 32541

ADDITIONS/CHANGES:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: ARNOLD HIVRY

CFO

04/11/2006

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