

FILED
Apr 11, 2007 8:00 am
Secretary of State

04-11-2007 90032 038 ***150.00

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P04000002917					
1. Entity Name TAVISTOCK GROUP, INC.					
Principal Place of Business 9350 CONROY WINDERMERE RD WINDERMERE, FL 34786			Mailing Address 9350 CONROY WINDERMERE RD WINDERMERE, FL 34786		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number NOT APPLICABLE	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent AMERICAN INFORMATION SERVICES, INC. 420 SOUTH ORANGE AVE. SUITE 1200 ORLANDO, FL 32801-4904			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ _____ City _____ FL Zip Code _____		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		DATE _____	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE PD NAME THAKKAR, RASESH STREET ADDRESS 9550 CONROY WINDERMERE RD CITY - ST - ZIP WINDERMERE, FL 34786	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS 9350 Conroy Windermere Rd. CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE VD NAME LEWIS, VIVIANNE STREET ADDRESS 9550 CONROY WINDERMERE RD CITY - ST - ZIP WINDERMERE, FL 34786	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS 9350 Conroy Windermere Rd. CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE VD NAME VOSS, JEFFERSON R STREET ADDRESS 9550 CONROY WINDERMERE RD CITY - ST - ZIP WINDERMERE, FL 34786	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS 9350 Conroy Windermere Rd. CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE SD NAME YOUTH, TOM STREET ADDRESS 9550 CONROY WINDERMERE RD CITY - ST - ZIP WINDERMERE, FL 34786	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS 9350 Conroy Windermere Rd. CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE TD NAME PIERCY, TYLER STREET ADDRESS 9550 CONROY WINDERMERE RD CITY - ST - ZIP WINDERMERE, FL 34786	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS 9350 Conroy Windermere Rd. CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE D NAME ANAND, CHRISTOPHER STREET ADDRESS 9550 CONROY WINDERMERE RD CITY - ST - ZIP WINDERMERE, FL 34786	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS 9350 Conroy Windermere Rd. CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date: 4-1-07 Daytime Phone #: 707-989-9000		

ATTACHMENT

40056813

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT
for TAVISTOCK ~~GROUP~~, INC.
DOCUMENT # P04000002917

Additional Officer:

Name and Address

Office

Douglas McMahon
9350 Conroy Windermere Rd.
Windermere, FL 34786

V