

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

5/

FILED
Jul 28, 2006 8:00 am
Secretary of State

05-16-2006 90271 001 ***100.00

DOCUMENT # L00000003633

1. Entity Name
THE OHIO GROUP, L.L.C.



Principal Place of Business
**1473 PERIWINKLE WAY
SANIBEL, FL 33957**

Mailing Address
**1473 PERIWINKLE WAY
SANIBEL, FL 33957**

30012277



DO NOT WRITE IN THIS SPACE

02142006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
65-0964750

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**PRITCHARD, WILLIAM L
1473 PERIWINKLE WAY
SANIBEL, FL 33957**

**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

Wm Pritchard

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

(NOTE: Registered Agent signature required when reappointing)

2/25/06

DATE

**Filing Fee is \$50.00
Due by May 1, 2008**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MEM
PRITCHARD, WILLIAM L
1473 PERIWINKLE WAY
SANIBEL, FL 33957**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MEM
PRITCHARD, ROGER
1473 PERIWINKLE WAY
SANIBEL, FL 33957**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MEM
GAETA, PAUL
1473 PERIWINKLE WAY
SANIBEL, FL 33957**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MEM
GAETA, MARGARETA
1473 PERIWINKLE WAY
SANIBEL, FL 33957**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MEM
SLANICKA, CJ
1473 PERIWINKLE WAY
SANIBEL, FL 33957**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MEM
ROBBINS, KATHY
1473 PERIWINKLE WAY
SANIBEL, FL 33957**

**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:

Wm Pritchard

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

Date

7/24/06

Daytime Phone #