

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000004580

Entity Name: STONEBRAKER GROUP, LLC

FILED  
Apr 23, 2007  
Secretary of State

**Current Principal Place of Business:**

8211 LAWTON  
PENSACOLA, FL 32514

**New Principal Place of Business:**

**Current Mailing Address:**

502 E ADAMS STREET  
MUNCIE, IN 47305

**New Mailing Address:**

FEI Number: 35-2105230

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BLAKENSHIP, SUZANNE  
4300 BAYOU BLVD  
SUITE 13  
PENSACOLA, FL 32503 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: STONEBRAKER, SCOTT J  
Address: 185 MIDDLE PLANTATION LANE  
City-St-Zip: GULF BREEZE, FL 32561

Title: MGRM ( ) Delete  
Name: TIBBITS, MARY J  
Address: 60 FT PICKENS RD #3  
City-St-Zip: PENSACOLA BEACH, FL 32561

**ADDITIONS/CHANGES:**

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: SCOTT J. STONEBRAKER

MGRM

04/23/2007

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