

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 27, 2006 8:00 am
Secretary of State

07-27-2006 90080 014 ****50.00

DOCUMENT # L01000001018

1. Entity Name
FLORIDA STRATEGIC GROUP, LLC



Principal Place of Business
2910 WINTER LAKE ROAD
LAKELAND, FL 33803

Mailing Address
PO DRAWER 3739
LAKELAND, FL 33802

DO NOT WRITE IN THIS SPACE



07242006No Chg-LLC

CR2E083 (11/05)

4. FEI Number
59-3690981

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

WILSON, KERRY M
141 5TH STREET NW
STE 300
WINTER HAVEN, FL 33880

**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 _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by September 6, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRP
SHEPP, DAVID A
2912 WINTER LAKE RD
LAKELAND, FL 33803

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
KILLEBREW, SAM H JR
2830 WINTER LAKE RD
LAKELAND, FL 33803

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**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: _____

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

Date

Daytime Phone #

7/24/06

863 668-8801