

2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT

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DOCUMENT # L01000015916

1. Entity Name  
INSIGNIA GROUP, L.C.



Principal Place of Business  
201-34TH STREET NORTH  
ST. PETERSBURG, FL 33713

Mailing Address  
201-34TH STREET NORTH  
ST. PETERSBURG, FL 33713

FILED  
07 APR 26 PM 3:45

ALL FLORIDA STATE  
TALLAHASSEE, FLORIDA



03282007 No Chg-LLC

CR2E083 (11/05)

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4. FEI Number  
59-2873465 48-1274846

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent.

CANNON, JOHN  
201 34TH ST N  
SAINT PETERSBURG, FL 33713

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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 May 1, 2007

9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGR  
BAUMAN, ROBB A  
201-34TH STREET NORTH  
ST. PETERSBURG, FL 33713

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGR  
CANNON, JOHN  
201-34TH STREET NORTH  
ST. PETERSBURG, FL 33713

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
*08/5/14*

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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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

4-5-07

727-327-9026

Date

Daytime Phone #