2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000000089

Entity Name: WARRINGTON GROUP, L.L.C.

1000 GRANDVIEW AVE 505

PITTSBURGH, PA 15211

Address:

City-St-Zip:

FILED Apr 27, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 677 EAST MAIN STREET GENEVA, OH 44041 **Current Mailing Address: New Mailing Address:** P.O. BOX 551260 JACKSONVILLE, FL 32255 FEI Number: 02-0539493 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ANSABACHER, LAWRENCE V 5150 BELFORT ROAD **BUILDING 100** JACKSONVILLE, FL 32256 US 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/MEMBERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete MILLER, JAMES E Name: Name: 677 EAST MAIN STREET Address: Address: City-St-Zip: GENEVA, OH 44041 City-St-Zip: Title: MGRM Title: () Delete () Change () Addition BAIERL, WILLIAM R Name: Name: Address: 677 EAST MAIN STREET Address: City-St-Zip: GENEVA, OH 44041 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition MOLNAR, LOUIS W Name: Name: 677 EAST MAIN STREET Address: Address: City-St-Zip: GENEVA, OH 44041 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: M& L PARTNERS, Name: Address: PO BOX 11067 Address: City-St-Zip: PITTSBURGH, PA 15237 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition MCDONOUGH, THOMAS J Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Address:

City-St-Zip:

SIGNATURE: JAMES E MILLER MGRM 04/27/2005