

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000021879

FILED  
May 01, 2006  
Secretary of State

Entity Name: ASSET DEVELOPMENT GROUP, LLC

## Current Principal Place of Business:

118 SALEM COURT  
SUITE A  
TALLAHASSEE, FL 32301 US

## New Principal Place of Business:

130 SALEM COURT  
TALLAHASSEE, FL 32301 US

## Current Mailing Address:

118 SALEM COURT  
TALLAHASSEE, FL 32301 US

## New Mailing Address:

130 SALEM COURT  
TALLAHASSEE, FL 32301 US

FEI Number: 72-1547513      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

POOLE, ANGELA M CPA  
118 SALEM COURT  
SUITE A  
TALLAHASSEE, FL 32301 US

## Name and Address of New Registered Agent:

POOLE, ANGELA M CPA  
130 SALEM COURT  
TALLAHASSEE, FL 32301 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: ANGELA M POOLE FOR THE FIRM

05/01/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: POOLE, ANGELA M CPA  
Address: POST OFFICE BOX 4045  
City-St-Zip: TALLAHASSEE, FL 32301 US

Title: MGRM ( ) Delete  
Name: POOLE, COREY D  
Address: POST OFFICE BOX 4045  
City-St-Zip: TALLAHASSEE, FL 32315 US

Title: MGR (X) Delete  
Name: MOSS, DORIS L  
Address: P.O. BOX 180896  
City-St-Zip: TALLAHASSEE, FL 32318 US

Title: MGR ( ) Delete  
Name: RONALD, MALLARY T  
Address: 118 SALEM COURT  
City-St-Zip: TALLAHASSEE, FL 32301

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR (X) Change ( ) Addition  
Name: RONALD, MALLARY T  
Address: 130 SALEM COURT  
City-St-Zip: TALLAHASSEE, FL 32301

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: COREY POOLE

MGR

05/01/2006

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