## 2005 LIMITED LIABILITY COMPANY

## FILED **ANNUAL REPORT** Feb 07, 2005 08:00 AM Secretary of State DOCUMENT # L02000029306 1. Entity Name L.G., LLC Principal Place of Business Mailing Address 877 N.E. JENSEN BEACH BLVD 877 N.E. JENSEN BEACH BLVD JENSEN BEACH, FL 34957 JENSEN BEACH, FL 34957 02012005No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For: 75-3096300 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GRUNBAUM, CHARLES DO NOT WRITE 877 N.E. JENSEN BEACH BLVD JENSEN BEACH, FL 34957 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 May 1, 2005 9. MANAGING MEMBERS/MANAGERS TITLE **EQUITY INVESTMENT CORPORATION** NAME STREET ADDRESS 877 N.E. JENSEN BEACH BLVD U00000219688 02/08/05-80037-007 50.00 JENSEN BEACH, FL 34957 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP THIP NAME STREET ADDRESS

11. I hereby certify that the information supplied with this filing does not qualify 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 signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

CITY-ST-ZIP TITLE NAME STREET ADDRESS

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