2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 20, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000009759

1. Entity Name
PELICAN CREEK INVESTORS GROUP, LLC

Principal Place of Business	Mailing Address
124 ROSE LANE NAPLES, FL 34114	124 ROSE LANE NAPLES, FL 34114

01302006 No Chg-LLC CRZE083 (11/05)

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4. FEI Number
71-0940495
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MARC F. OATES, P.A.
% MARC F. OATES, ESQ.
10001 TAMIAMI TRAIL NORTH, SUITE 119
NAPLES, FL 34108

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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, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	LACOMBE, GEORGE J
STREET ADDRESS	10 ACACIA AVE./WESTON ONTARIO
CITY-ST-ZIP	CANADA M9M 1H7.
TITLE	MGRM
NAME	JULIANO, JOHN J
STREET ADDRESS	209 MEADOW STREET
CITY-ST-ZIP	AGAWAM, MA 01001
TITLE	MGRM
NAME	REED, BOB G
STREET ADDRESS	124 ROSE LANE
CITY-ST-ZIP	NAPLES, FL 34114
TITLE	MGRM
NAME	REED, BARBARA B
STREET ADDRESS	124 ROSE LANE
CITY-ST-ZIP	NAPLES, FL 34114
TITLE	MGRM
NAME	FEDOR, RANA K
STREET ADDRESS	1481 N. 750 E.
CITY-ST-ZIP	WHITESTOWN, IN 46075
TITLE	MGRM
NAME	ARTMAN, GARY L
STREET ADDRESS	1595 N. 750 E.
CITY-ST-ZIP	WHITESTOWN, IN 46075

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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: ✓ Robert R. Reed ✓ 2-16-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #