2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000011533

Entity Name: THE POINT GROUP LLC.

FILED Apr 12, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 690 SOUTH FLORA POINT INVERNESS, FL 34450 **Current Mailing Address: New Mailing Address:** 690 SOUTH FLORA POINT INVERNESS, FL 34450 FEI Number: 33-1048808 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: KEARSE, JAMES CASEY 690 SOUTH FLORA POINT INVERNESS, FL 34450 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/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition MGR () Delete KEARSE, J.CASEY Name: Name: 690 S. FLORA POINT Address: Address: City-St-Zip: INVERNESS, FL 34450 City-St-Zip: Title: MGR () Delete Title: () Change () Addition KEARSE, J. ALLAN Name: Name: Address: 1009 GORGAS CIRCLE Address: City-St-Zip: FT SAM HOUSTON, TX 78234 City-St-Zip: Title: MGR () Delete Title: () Change () Addition KEARSE, RONALD W Name: Name: Address: 15142 HOLLEYSIDE DRIVE Address: City-St-Zip: MONTCLAIR, VA 22025 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: RAMSEY, TIMOTHY J Name: 3424 S WINDING PATH Address: Address: City-St-Zip: INVERNESS, FL 34450 City-St-Zip: Title: MGR () Delete Title: () Change () Addition KEARSE, LISA A Name: Name: 15142 HOLLEYSIDE DRIVE Address: Address: City-St-Zip: MONTCLAIR, VA 22025 City-St-Zip: Title: () Delete Title: () Change () Addition KEARSE, FAYE J Name: Name: Address: 690 S. FLORA POINT Address: INVERNESS, FL 34450 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: J CASEY KEARSE MGR 04/12/2009