## 2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

**DOCUMENT # L03000012458** 

1. Entity Name LEEDOM GROUP LLC



Principal Place of Business

POST OFFICE BOX 816 DESTIN, FL 32540

Mailing Address

POST OFFICE BOX 816 DESTIN, FL 32540

## **FILED** Apr 26, 2007 8:00 am Secretary of State

04-26-2007 90027 043 \*\*\*\*55.00



03212007 No Chg-LLC

CR2E083 (11/05)

ŀ					\$5.0	_	Additional
ŝ		56-2341988					Not Applicable
Ţ	4.	FEI Number					Applied For

5. Certificate of Status Desired

6. Name and Address of Current Registered Agent

LEEDOM, DONALD B 340 VININGS WAY BLVD #12102 DESTIN, FL 32541

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						CE

	named entity submits this statement for the purpose of chan ions of registered agent.	ging its registered office or registered agent, or both, in the State	of Florida. I am familiar with, and accept
SIGNATURE_			
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
	ling Fee is \$50.00 ue by May 1, 2007 MANAGING MEMBERS/MANAGERS		The second se
TITLE	MGRM		
NAME	LEEDOM, GREG	The state of the s	
STREET ADDRESS	PO BOX 816		
CITY-ST-ZIP	DESTIN, FL 32540		
TITLE	MGRM		
NAME	LEEDOM, DONALD B		
STREET ADDRESS	PO BOX 816		
CITY-ST-ZIP	DESTIN, FL 32540		

## DO NOT WRITE IN THIS SPACE

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 regerver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** 

TITLE NAME STREET ADDRESS

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

(850)699-8071