



**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 30, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L03000013120</b> 1. Entity Name <b>SIX GIRL PARTNERS, LLC</b>	
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Principal Place of Business <b>4615 US HWY 17 S. SUITE #1 ORANGE PARK, FL 32003</b>	Mailing Address <b>4615 US HWY 17 S. SUITE #1 ORANGE PARK, FL 32003</b>
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04272007 No Chg-LLC	CR2E083 (11/05)
4. FEI Number <b>56-2355165</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00 Additional Fee Required</b>

6. Name and Address of Current Registered Agent  <b>TOLSON, JOHN F JR. 462 KINGSLEY AVE. SUITE 101 ORANGE PARK, FL 32073</b>
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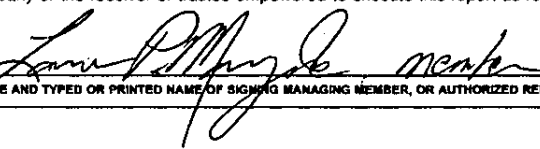
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE _____ <small>(Signature, typed or printed name of registered agent and title if applicable)</small>	DATE _____ <small>(NOTE: Registered Agent signature required when reinstating)</small>

<b>Filing Fee is \$50.00 Due by May 1, 2007</b>
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9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM MANGUS, LAWRENCE P III 2297 STOCKTON DRIVE GREEN COVE SPRINGS, FL 32043</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM WAGNER, WILLIAM J 545 RIVIERA DRIVE TAMPA, FL 33606</b>
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<p>U000000745258 05/16/07-80021-023 50.00</p> <p><b>DO NOT WRITE IN THIS SPACE</b></p>
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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.	
<b>SIGNATURE:</b>  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	<b>4/27/07</b> <b>904-887-3616</b> <small>Date Daytime Phone #</small>