2004 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Feb 23, 2004 8:00 am
Secretary of State
02-06-2004 90163 027 ****50.00
02-23-2004 90346 042 *****5.00

DOCUMENT # L03000015402

1. Entity Name
THE GOLDEN GROUP, LLC

Principal Place of Business	Mailing Address
792 WEST LUMSDEN AVENUE BRANDON FL 33511 US	792 WEST LUMSDEN AVENUE BRANDON FL 33511 US

MOORE CR2E083 (11/03)

2. Principal Place of Business	3. Mailing Address
138 E. BLOOMINGDALE AVE	138 E. BLOOMINGDALE AVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: BRANDON, FL	City & State: BRANDON, FL
Zip: 33511 Country: USA	Zip: 33511 Country: USA

4. FEI Number — ☐ Applied For ☒ Not Applicable

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

6. Name and Address of Current Registered Agent

OWEN, JOSEPH
C/O GOLDEN RULE MORTGAGE
792 WEST LUMSDEN AVENUE
BRANDON FL 33511

7. Name and Address of New Registered Agent

Name: OWEN, JOSEPH
Street Address (P.O. Box Number is Not Acceptable): C/O GOLDEN RULE MORTGAGE
138 E. BLOOMINGDALE AVE
City: BRANDON FL Zip Code: 33511

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: Joseph M. Owen DATE: 2-2-04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $50.00
Make Check Payable to Florida Department of State
Due By May 1, 2004

STREET ADDRESS CHANGE ONLY

9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM OWEN, JOSEPH ~~792 WEST LUMSDEN AVENUE~~ BRANDON FL 33511	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	138 E BLOOMINGDALE AVE	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM OWEN, GAIL 792 WEST LUMSDEN AVENUE BRANDON FL 33511	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	138 E. BLOOMINGDALE AVE	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM ALLEN, TODD 792 WEST LUMSDEN AVENUE BRANDON FL 33511	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	138 E BLOOMINGDALE AVE.	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM OWEN, MICHAEL 792 WEST LUMSDEN AVENUE BRANDON FL 33511	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	138 E BLOOMINGDALE AVE	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM OWEN, AMY 792 WEST LUMSDEN AVENUE BRANDON FL 33511	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	138 E. BLOOMINGDALE AVE.	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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 liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Joseph M. Owen JOSEPH M. OWEN 2-2-04 813 653-2644
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #