

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000026819

Entity Name: THE DAISY GROUP LLC

FILED
Apr 05, 2007
Secretary of State

Current Principal Place of Business:

6220 S. ORANGE BLOSSOM TRAIL
SUITE 197
ORLANDO, FL 32809

New Principal Place of Business:

2295 S HIAWASSEE RD
SUITE 204
ORLANDO, FL 32835 US

Current Mailing Address:

6220 S. ORANGE BLOSSOM TRAIL
SUITE 197
ORLANDO, FL 32809

New Mailing Address:

2295 S HIAWASSEE RD
SUITE 204
ORLANDO, FL 32835 US

FEI Number: 20-0130457

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BURKE, LESLIE
7566 SOMERSET SHORES CT
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

BURKE, LESLIE
2295 S HIAWASSEE RD
SUITE 204
ORLANDO, FL 32835 US

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: LESLIE BURKE

04/05/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BURKE, PETER T
Address: 7566 SOMERSET SHORES CT
City-St-Zip: ORLANDO, FL 32819

Title: MGR () Delete
Name: GRANT, KEYLA M
Address: 2696 QUANTUM LAKES DR.
City-St-Zip: BOYNTON BEACH, FL 33426

Title: MGR () Delete
Name: VERA, ARMANDO
Address: 3730 BLOSSOM ST
City-St-Zip: KISSIMMEE, FL 34746

Title: MGRM (X) Delete
Name: BURKE, LESLIE P
Address: 7566 SOMERSET SHORES CT
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: VERA, IGDA M
Address: 3730 BLOSSOM ST
City-St-Zip: KISSIMMEE, FL 34746 US

Title: MGRM (X) Change () Addition
Name: LESLIE, BURKE
Address: 2295 S HIAWASSEE RD SUITE 204
City-St-Zip: ORLANDO, FL 32835 US

Title: MGRM (X) Change () Addition
Name: BURKE, PETER
Address: 2295 S HIAWASSEE RD SUITE 204
City-St-Zip: ORLANDO, FL 32835 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: LESLIE BURKE

MGRM

04/05/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date