## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED Jun 27, 2006 8:00 am Secretary of State

DOCUMENT # L03000029524  1. Entity Name LCGS, L.L.C.							Secretary of Stat 06-27-2006 90005 005 ****50.00					
1424 GLEN	te of Business HEATHER DRIVE E, FL 34786		Mailing Address 1424 GLEN HEATHER DRIVE WINDERMERE, FL 34786									
2. Principal P	lace of Business	/	3. Mailing Address , /									
1/22 Algare Loop Suite, Apt. #, etc.			Suite Apt. # etc.			6	E COUNTRY O	IS ENTON INTO RETITO DUTITO	OKAI CRIID HADO I	BIRI BITTA (IRO BI	INDI W INDI	
<u> </u>							06242006		CR2E	083 (11/05)		
Windermere FL			Windermere, FL			-	4. FEI Numb 68-056			<del></del>	oplied For ot Applicable	
3478	×6 C	ountry USA	34786	Coun	"SA		5. Certificat	te of Status Desired		\$5.00 Add		
		Address of Current R	legistered Agent		Name		7. Name an	d Address of New	r Registered	Agent		
CRAMER, CHARLES W												
	EWATER DRI ), FL 32804	IVE, SUITE 100			Street Address (P.O. Box Number is Not Acceptable)							
					City					Zip Cod	е	
8. The above	named entity sub	mits this statement for	the purpose of changing its		,	registere	ed agent or be	oth in the State of	FL Florida Lam	<b>-</b>   '		
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent argenture required when reinstating)  DATE												
	ling Fee is \$5 by September						1	ake check p Ida Departn	payable to nent of State	ė.		
9.		MANAGING MEMBER	·	10.				ADDITION	S/CHANGES			
TITLE NAME	MGRM STRICKLAND	, R. VANCE	Delete	TITLE NAM					,	Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP	1424 GLEN HI WINDERMER	EATHER DRIVE	•	ET ADORESS -ST-ZIP	windermere, FL 34786  1122 Algare Loop  1122 Algare Loop  windermere, FZ 34786							
TITLE	MGRM	2,72 04700	☐ Delete	TITLE		<u> </u>	matri	nere, c	- 37	Change	Addition	
NAME Street adoress	LAMMERS, RO	OLAND M EATHER DRIVE		ET ADDRESS	DORESS 1122 Algare Loop							
CTTY-ST-ZIP	WINDERMER			-ST-ZIP	windermere, F				786			
title Name	MGRM CORSELLO, F	ROBERT G	Delete	TITLE Nami	1					Change .	Addition	
STREET ADDRESS CITY-ST-ZIP	1424 GLEN H	EATHER DRIVE		ET ADORESS	<i> </i>			400	.,76	/		
TITLE	MGRM	E, FL 34/86	Delete	TITLE	-ST-ZIP	W	inder	mere,	FL 3	☐ Change	✓ Addition	
NAME Street Adoress	GREENWALD	, DARREN S EATHER DRIVE		NAME	E					Grange		
CITY-ST-ZIP	WINDERMER				et address -st-zip							
TITLE NAME			☐ Delete	TITLE	l l					☐ Change	Addition	
STREET ADDRESS				STRE	ET ADDRESS							
CITY-ST-ZIP			☐ Delete	CITY-	-ST-ZIP			<del>_</del> .		☐ Change	C Addition	
NAME			and Denie	NAME	E					☐ cisange	☐ Addition	
STREET ADDRESS CITY-ST-ZIP	٠.,				ET ADDRESS -ST-ZIP							
11. I hereby certify that the information supplied with this filling 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.												
SIGNATURE: (24/06 (487)258-8097 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE AND MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Date Daylorie From #												