

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 23, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000030977

1. Entity Name
 MCKENNEY GROUP, LLC



Principal Place of Business
 2907 BAY TO BAY BLVD
 SUITE 314
 TAMPA, FL 33629

Mailing Address
 2907 BAY TO BAY BLVD
 SUITE 314
 TAMPA, FL 33629



01262006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
 20-0164676

Applied For
 Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
 Fee Required

6. Name and Address of Current Registered Agent

NORTH, ANGELA F
 15950 BAY VISTA DRIVE
 SUITE 250
 CLEARWATER, FL 33760

**DO NOT WRITE
 IN THIS SPACE**

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 signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
 Due by May 1, 2006**

110000047772
 04/07/06-80001-016 55.00

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM
 NAME MCKENNEY, SEAN M
 STREET ADDRESS 2912 W BAY VILLA AVE
 CITY-ST-ZIP TAMPA, FL 33611

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

SIGNATURE: *Sean McKenney*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

2-2-06

Date

813-857-9933

Daytime Phone #