2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

NAME STREET ADDRESS CITY-ST-ZIP TITLE. NAME STREET ADDRESS CITY-ST-ZIP

Jan 12, 2006 08:00 AM DOCUMENT # L03000035739 **Secretary of State** 1. Entity Name MPBJC GROUP, L.L.C. Principal Place of Business Mailing Address 4099 SKATES CIRCLE **4099 SKATES CIRCLE** FORT MYERS, FL 33905 FORT MYERS, FL 33905 01042006No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number NOT APPLICABLE Applied For Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HENDRY, HARRY O DO NOT WRITE 2242 MAIN STREET FT. MYERS, FL 33905 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 reinstailing) Filing Fee is \$50.00 Due by May 1, 2006 H00000384848 01/17/06-80032-003 50.00 MANAGING MEMBERS/MANAGERS 9. TITLE MGR HOWELL, DOROTHY J 4099 SKATES CIRCLE STREET ADDRESS CSTY -ST - ZIP FORT MYERS, FL 33905 TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-2IP TITLE

FILED

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: 1-6-06
SIGNATURE AND TYPED OF STRING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE DOILD DOUGO PHONE *