2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000001133

Entity Name: THE POWELL GROUP "LLC"

FILED Jan 09, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

131 GOLDEN DAYS DRIVE 316 EAST MAINE AVE.

CASSELBERRY, FL 32712 LONGWOOD, FL 327505448 US

Current Mailing Address: New Mailing Address:

131 GOLDEN DAYS DRIVE 316 EAST MAINE AVE

CASSELBERRY, FL 32712 LONGWOOD, FL 327505448 US

FEI Number: 59-3451635 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

POWELL, NANCY
131 GOLDEN DAYS DRIVE
316 EAST MAINE AVE.

CASSELBERRY, FL 32712 US LONGWOOD, FL 327505448 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: NANCY POWELL 01/09/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition

Name: POWELL, NANCY Name: POWELL, NANCY
Address: 131 GOLDEN DAYS DRIVE Address: 316 EAST MAINE AVE.

City-St-Zip: CASSELBERRY, FL 32712 City-St-Zip: LONGWOOD, FL 327505448 US

Title: MGR () Delete Title: MGR (X) Change () Addition Name: POWELL, JAMES Name: POWELL, JAMES

Address: 131 GOLDEN DAYS DRIVE Address: 316 EAST MAINE AVE.

City-St-Zip: CASSELBERRY, FL 32712 City-St-Zip: LONGWOOD, FL 327505448 US

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: NANCY POWELL MGR 01/09/2006