

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000010355

Entity Name: ADC GROUP, LLC

FILED  
Aug 01, 2005  
Secretary of State

## Current Principal Place of Business:

9645 BAYMEADOWS RD,  
883  
JACKSONVILLE, FL 32256

## New Principal Place of Business:

2744 CONCH HOLLOW DRIVE  
BRANDON, FL 33511

## Current Mailing Address:

9645 BAYMEADOWS ROAD  
883  
JACKSONVILLE, FL 32256

## New Mailing Address:

2744 CONCH HOLLOW DRIVE  
BRANDON, FL 33511

FEI Number: 73-1695959      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

DAVIS, COLIN M  
9645 BAYMEADOWS ROAD  
883  
JACKSONVILLE, FL 32256 US

## Name and Address of New Registered Agent:

DAVIS, COLIN M  
2744 CONCH HOLLOW DRIVE  
BRANDON, FL 33511 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: COLIN M. DAVIS

08/01/2005

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: PRES ( ) Delete  
Name: SAWYERR, AKINBIYI O  
Address: 3500 UNIVERSITY BOULEVARD, N #3002  
City-St-Zip: JACKSONVILLE, FL 32277

Title: VP (X) Delete  
Name: TAYLOR, DWAYNE  
Address: 8787 SOUTHSIDE BOULEVARD #1918  
City-St-Zip: JACKSONVILLE, FL 32256

Title: CFO ( ) Delete  
Name: DAVIS, COLIN M  
Address: 9645 BAYMEADOWS ROAD #883  
City-St-Zip: JACKSONVILLE, FL 32256

## ADDITIONS/CHANGES:

Title: PRES (X) Change ( ) Addition  
Name: SAWYERR, AKINBIYI O  
Address: 2744 CONCH HOLLOW DRIVE  
City-St-Zip: BRANDON, FL 33511

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

Title: CFO (X) Change ( ) Addition  
Name: DAVIS, COLIN M  
Address: 2744 CONCH HOLLOW DRIVE  
City-St-Zip: BRANDON, FL 33511

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: COLIN M. DAVIS

CFO

08/01/2005

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