

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000024721

**FILED**  
**Mar 09, 2005**  
**Secretary of State**

**Entity Name:** YOUR FLORIDA GROUP LLC

**Current Principal Place of Business:**

8765 CHEROKEE TRAIL  
KISSIMMEE, FL 34747

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 136255  
CLERMONT, FL 34713

**New Mailing Address:**

FEI Number: 57-1202930

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LUPPINO, CHRISTOPHER  
8765 CHEROKEE TRAIL  
KISSIMMEE, FL 34747 US

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

LUPPINO, CHRISTOPHER W  
8765 CHEROKEE TRAIL  
KISSIMMEE, FL 34747 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: CHRISTOPHER W. LUPPINO

03/09/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: WHITELAW, JAMES G  
Address: 6 TROUP VIEW / BANFF  
City-St-Zip: SCOTLAND NE AB45 3DF,

Title: MGR ( ) Delete  
Name: LUPPINO, CHRISTOPHER  
Address: 8765 CHEROKEE TRAIL  
City-St-Zip: KISSIMMEE, FL 34747

**ADDITIONS/CHANGES:**

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

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

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: CHRISTOPHER W. LUPPINO

MGR

03/09/2005

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