2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000029928

Entity Name: DWYER INVESTMENT GROUP LLC

149 BARRINGTON DRIVE

PALM COAST, FL 32137

Address:

City-St-Zip:

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 111 N. STATE STREET BUNNELL, FL 32110 **Current Mailing Address: New Mailing Address:** PO BOX 350864 PO BOX 37 PALM COAST, FL 32135 BUNNELL, FL 32110 FEI Number: 20-1286611 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: DWYER, MARC E 149 BARRINGTON DRIVE PALM COAST, FL 32137 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete DWYER, MARC E Name: Name: 149 BARRINGTON DRIVE Address: Address: City-St-Zip: PALM COAST, FL 32137 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition DWYER, EVELYN Name: Name: Address: 60 EGRET TRAIL Address: City-St-Zip: PALM COAST, FL 32164 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition DWYER, DULCIA Name: Name: Address: **60 EGRET TRAIL** Address: City-St-Zip: PALM COAST, FL 32164 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: DWYER, GLADSTONE Name: Address: **60 EGRET TRAIL** Address: City-St-Zip: PALM COAST, FL 32164 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition DWYER, ROSE Name: Name:

I hereby certify that the information supplied with this filing does not qualify 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.

Address:

City-St-Zip:

SIGNATURE: MARC DWYER MGRM 04/30/2008