2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000041045

Entity Name: CMG PARTNERS, L.L.C.

1441 ISLAND CLUB DRIVE

VERO BEACH, FL 32963

Address:

City-St-Zip:

FILED Mar 20, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4300 SUMMER BREEZE TERRACE VERO BEACH, FL 32967 **Current Mailing Address: New Mailing Address:** 4300 SUMMER BREEZE TERRACE VERO BEACH, FL 32967 FEI Number: 20-1227506 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: GIVEN, KEVIN J 4300 SUMMER BREEZE TERRACE VERO BEACH, FL 32967 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 CORR, THOMAS L Name: Name: Address: 1265 LITTLE HARBOR LANE Address: City-St-Zip: VERO BEACH, FL 32963 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: GIVEN, KEVIN J Name: Address: 4300 SUMMER BREEZE TERRACE Address: City-St-Zip: VERO BEACH, FL 32967 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition MULVEY, STEVE 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: KEVIN J GIVEN MGR 03/20/2009