2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 21, 2009
Secretary of State

DOCUMENT# L04000047821

Entity Name: FREEPORT GROUP, LLC

Current Principal Place of Business:

47 SHIPYARD ROAD
FREEPORT, FL 32439

New Principal Place of Business:

Current Mailing Address:

PO BOX 332
FREEPORT, FL 32439

New Mailing Address:

FEI Number: 20-1290258 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BRANNON, RONNIE L JR
47 SHIPPYARD ROAD
FREEPORT, FL 32439 US

Name and Address of New Registered Agent:

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:

Title:	MGRM	( ) Delete
Name:	BRANNON, RONNIE L JR	
Address:	47 SHIPYARD ROAD	
City-St-Zip:	FREEPORT, FL 32439	
Title:	MGRM	( ) Delete
Name:	BRANNON, RONNIE L SR	
Address:	P.O. BOX 504	
City-St-Zip:	FREEPORT, FL 32439	
Title:	MGRM	( ) Delete
Name:	BRANNON, SCOTT A	
Address:	P.O. BOX 332	
City-St-Zip:	FREEPORT, FL 32439	
Title:	MGRM	( ) Delete
Name:	ANDREWS, ANGUS (GUS)	
Address:	P.O. BOX 405	
City-St-Zip:	DEFUNIAK SPRINGS, FL 32435	
Title:	MGRM	( ) Delete
Name:	JONES, WAYNE	
Address:	184 TWELVE OAK LANE	
City-St-Zip:	FREEPORT, FL 32439	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 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: RONNIE BRANNON JR MGRM 02/21/2009

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