

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 03, 2007 08:00 A
Secretary of State

DOCUMENT # L04000067946	
1. Entity Name THE ISIS GROUP, LLC	
Principal Place of Business 5376 CYPRESS RESERVE PLACE WINTER PARK, FL 32792	Mailing Address 5376 CYPRESS RESERVE PLACE WINTER PARK, FL 32792



04302007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 51-0528930	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
CHINODA, ALAN M 5376 CYPRESS RESERVE PLACE WINTER PARK, FL 32792

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Alan M. Chinoda* 4/27/07
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

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05/24/07-80069-007 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CHINODA, ALAN M 5376 CYPRESS RESERVE PLACE WINTER PARK, FL 32792
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CHINODA, ANNE K 5376 CYPRESS RESERVE PLACE WINTER PARK, FL 32792
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CHINODA, MARK 5376 CYPRESS RESERVE PLACE WINTER PARK, FL 32792
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CHINODA, ALEXANDER 5376 CYPRESS RESERVE PLACE WINTER PARK, FL 32792
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: *Alan M. Chinoda* 4/27/07 407-252-1237
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #