

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000071689

**FILED**  
**Mar 01, 2009**  
**Secretary of State**

**Entity Name:** THE GRANVILLE GROUP, LLC

**Current Principal Place of Business:**

429 10TH AVENUE W  
PALMETTO, FL 34221

**New Principal Place of Business:**

6511 BAYSHORE ROAD  
PALMETTO, FL 34221

**Current Mailing Address:**

429 10TH AVENUE W  
PALMETTO, FL 34221

**New Mailing Address:**

6511 BAYSHORE ROAD  
PALMETTO, FL 34221

FEI Number: 20-1780097

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BURTON, MICHAEL A.G.  
429 10TH AVENUE WEST  
PALMETTO, FL 34221 US

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

BURTON, MICHAEL A.G.  
6511 BAYSHORE ROAD  
PALMETTO, FL 34221 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: \_\_\_\_\_

03/01/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: BURTON, MICHAEL A G  
Address: 6511 BAYSHORE ROAD  
City-St-Zip: PALMETTO, FL 34221

Title: MGRM ( ) Delete  
Name: BURTON, WILLIAM G  
Address: 6511 BAYSHORE ROAD  
City-St-Zip: PALMETTO, FL 34221

**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 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: MICHAEL AG BURTON

MGR

03/01/2009

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