2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jan 12, 2006 08:00 AM Secretary of State

1. Entity Name

THE COOPER GROUP, LLC



Principal Place of Business

2033 MAIN STREET

STE. 600 SARASOTA, FL 34237

US

Mailing Address

2033 MAIN STREET

STE. 600

SARASOTA, FL 34237

US



DO NOT WRITE IN THIS SPACE

01042006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number NOT APPLICABLE Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

MANAGING MEMBERS/MANAGERS

CHARBONNEAU, ANDRE K 2033 MAIN STREET SUITE 600 SARASOTA, FL 34237

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this	statement for the purpose of changing		g its registered office or registered		egistered agent, or both, in the	agent, or both, in the State of Florida.		I am familiar with, and accept	
the obligations of registered agent.			_		***			* *	
SIGNATIBE	=								

(NOTE, Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2006

9.

<u>y.</u>	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET AOORESS CITY-SI-ZIP	MGR COOPER, ANDREW H 5300 OCEAN BLVD. #904 SARASOTA, FL 34242
TITLE MAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY:ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-SI-ZIP	
11. (hereby	certify that the information supplied with this filing does not qualify for the e-

//00000384079 01/13/06-80027-014 55.00

DATE

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filling 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 hustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Andre K. Charbonneau

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1/4/06 941-366-

e Daytime Phone