


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 24, 2008 08:00 A
Secretary of State

DOCUMENT # L04000077106 1. Entity Name IMAGE GROVE, LLC	
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Principal Place of Business 111 N. ORANGE AVE., SUITE 710 ORLANDO, FL 32801	Mailing Address 111 N. ORANGE AVE., SUITE 710 ORLANDO, FL 32801
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DO NOT WRITE IN THIS SPACE



03122008No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-1798916	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

**LEMASTUS, DON
111 N. ORANGE AVE., SUITE 710
ORLANDO, FL 32801**

**DO NOT WRITE
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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

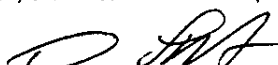
**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

000000865942
04/09/08-80044-005 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LEMASTUS, DON 111 N. ORANGE AVE., SUITE 710 ORLANDO, FL 32801
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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:  **DON LEMASTUS, MGR** **3-20-08** **407-425-0078**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #