2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000086511

Current Principal Place of Business:

Address:

City-St-Zip:

5467 OAKMONT DR

MILTON, FL 32571

220 WEST GARDEN STREET, SUITE 606

Entity Name: IVAN GROUP, L.L.C.

FILED Apr 02, 2009 Secretary of State

New Principal Place of Business:

SUNTRUST TOWER PENSACOLA, FL 32502 **Current Mailing Address: New Mailing Address:** 220 WEST GARDEN STREET, SUITE 606 SUNTRUST TOWER PENSACOLA, FL 32502 FEI Number: 56-2491544 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: BEASLEY, ROBERT O ESQ 220 WEST GARDEN STREET, SUITE 606 SUNTRUST TOWER PENSACOLA, FL 32502 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: **PVST** Title: () Change () Addition () Delete GREEN, SCOTT Name: Name: 1123 PEARSON RD Address: Address: City-St-Zip: MILTON, FL 32583 City-St-Zip:

Title: () Delete Title: () Change () Addition BEASLEY, ROBERT Name: Name: Address: 2455 BLUFFS CIR Address: City-St-Zip: PENSACOLA, FL 32503 City-St-Zip: Title: () Delete Title: () Change () Addition JEFF, MARCUS Name: Name: 6049 W CANBRIDGE WAY Address: Address: City-St-Zip: MILTON, FL 32571 City-St-Zip: () Delete Title: Title: () Change () Addition LILE, BILL Name: Name: 2145 DEL BARCO LANE Address: Address: City-St-Zip: MILTON, FL 32583 City-St-Zip: Title: () Delete Title: () Change () Addition BAILEY, BILL Name: Name: 1600 E 34TH AVE Address: Address: City-St-Zip: PENSACOLA, FL 32503 City-St-Zip: Title: () Delete Title: () Change () Addition STEELMAN, LAWRENCE Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: SCOTT GREEN PRES 04/02/2009