## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000088353

Entity Name: CSG GROUP, LLC

FILED May 01, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

5623 US HIGHWAY 19 6328 U S HWY 19

SUITE 201 NEW PORT RICHEY, FL 34652 NEW PORT RICHEY, FL 34652

**Current Mailing Address: New Mailing Address:** 

PO BOX 670 PO BOX 1089

PORT RICHEY, FL 34673 PORT RICHEY, FL 34673

FFI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

GALLAGHER, CRAIG S GALLAGHER, CRAIG S 5623 US HIGHWAY 19 6328 U S HWY 19

NEW PORT RICHEY, FL 34652 US SUITE 201

NEW PORT RICHEY, FL 34652 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: 05/01/2008

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM () Delete Title: MGRM (X) Change ( ) Addition

GALLAGHER, CRAIG S GALLAGHER, CRAIG S Name: Name: Address: 5623 US HIGHWAY 19 SUITE 201 Address: 6328 U S HWY 19

City-St-Zip: NEW PORT RICHEY, FL 34652 US City-St-Zip: NEW PORT RICHEY, FL 34652 US

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: CRAIG S. GALLAGHER **MGRM** 05/01/2008