## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000092526

Entity Name: SCH GROUP LLC

City-St-Zip:

PACE, FL

FILED Sep 06, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 5724 ENGLISH TURN DRIVE PACE, FL 32571 **Current Mailing Address: New Mailing Address:** 5724 ENGLISH TURN DRIVE PACE, FL 32571 FEI Number: 52-2451754 FEI Number Applied For ( ) FEI Number Not Applicable ( ) 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: **BUSINESS FILINGS INCORPORATED** 1203 GOVERNORS SQUARE BLVD SUITE 101 TALLAHASSEE, FL 323012960 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: MGRM () Delete Title: () Change () Addition SCHMIDT, LANCE Name: Name: Address: 5724 ENGLISH TURN DRIVE Address: City-St-Zip: PACE, FL 32571 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: HARRIS, RONALD D Name: Address: 657 NORTH PACE BLVD. Address: City-St-Zip: PENSACOLA, FL 32505 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition TORRES, ELVIN C Name: Name: % 5724 ENGLISH TURN DRIVE Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

City-St-Zip:

SIGNATURE: LANCE R. SCHMIDT MGRM 09/06/2005