

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 20, 2006 08:00 AM
Secretary of State

DOCUMENT # L05000000442 1. Entity Name BAIN III GROUP ONE, LLC	
--	---

Principal Place of Business 711 CONFEDERATE COURT GULF BREEZE, FL 32561	Mailing Address P.O. BOX 6592 NAVARRE, FL 32566
---	---



02132006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 03-0553172	Applied For ☐ Not Applicable
------------------------------------	--

5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required
---	---------------------------------------

6. Name and Address of Current Registered Agent BAIN, CLARENCE D III 711 CONFEDERATE COURT GULF BREEZE, FL 32561
--

**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 any) required when changing. (NOTE: Registered agent signature required when changing.) DATE _____

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY ST ZIP	MGRM BAIN, CLARENCE D III 711 CONFEDERATE COURT GULF BREEZE, FL 32561
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 ST ZIP	
TITLE NAME STREET ADDRESS CITY ST ZIP	

**DO NOT WRITE
IN THIS SPACE**

000000439705
03/02/06-80011-010 50.00

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 600, Florida Statutes.

SIGNATURE:

Clarence D. Bain III

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

2-13-06

850-916-9086