

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000002881

FILED
May 05, 2006
Secretary of State

Entity Name: THE MITCHELL DEVELOPMENT GROUP, LLC

Current Principal Place of Business:

201 S. BISCAYNE BLVD.
34TH FLOOR
MIAMI, FL 33131 US

New Principal Place of Business:

8727 CARLYLE AVE
MIAMI BEACH, FL 33139 US

Current Mailing Address:

201 S. BISCAYNE BLVD.
34TH FLOOR
MIAMI, FL 33131 US

New Mailing Address:

5564 SOUTH LEE ST.
LITTLETON, CO 80127 US

FEI Number: 20-2156399 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:

FERRELL GROUP CORPORATE SERVICES, LLC
201 S. BISCAYNE BLVD.
34TH FLOOR
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

EMISON, ARTHUR
5564 SOUTH LEE ST.
LITTLETON, CO, FL 80127 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: ART EMISON

05/05/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MITCHELL, KORY
Address: 201 S. BISCAYNE BLVD., 34TH FLOOR
City-St-Zip: MIAMI, FL 33131 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MITCHELL, KORY
Address: 934 LAFAYETTE
City-St-Zip: DENVER, CO 80218 US

I hereby certify that the information supplied with this filing does not qualify for the 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: KORY MITCHELL

MGR

05/05/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date