2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 16, 2007
Secretary of State

DOCUMENT# L05000010684

Entity Name: 26 81 GROUP, LLC

Current Principal Place of Business:

495 PALO VERDE DRIVE
NAPLES, FL 34119

New Principal Place of Business:

23004 SHADY KNOLL DR
BONITA SPRINGS, FL 34135

Current Mailing Address:

495 PALO VERDE DRIVE
NAPLES, FL 34119

New Mailing Address:

23004 SHADY KNOLL DR
BONITA SPRINGS, FL 34135

FEI Number: 20-2240165 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STAHLY, STEVEN C
495 PALO VERDE DRIVE
NAPLES, FL 34119 US

Name and Address of New Registered Agent:

FISHER, R DOUGLAS
23004 SHADY KNOLL DR
BONITA SPRINGS, FL 34135 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: DOUG FISHER 02/16/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: STAHLY, STEVEN C
Address: 495 PALO VERDE DRIVE
City-St-Zip: NAPLES, FL 34119

Title: MGR ( ) Delete
Name: FISHER, R. DOUGLAS
Address: 23004 SHADY KNOLL DR.
City-St-Zip: BONITA SPRINGS, FL 34135

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: FISHER, R DOUGLAS
Address: 23004 SHADY KNOLL DR
City-St-Zip: BONITA SPRINGS, FL 34135

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: DOUG FISHER MRG 02/16/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date