2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 14, 2006
Secretary of State

DOCUMENT# L05000021059

Entity Name: FOUR FALCONS INVESTMENT GROUP, LLC

Current Principal Place of Business:

9604 ENCLAVE PLACE
PORT ST. LUCIE, FL 34986

New Principal Place of Business:

Current Mailing Address:

9604 ENCLAVE PLACE
PORT ST. LUCIE, FL 34986

New Mailing Address:

FEI Number: 04-3808241 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GRAZI, LEIF J
217 S.E. OCEAN BLVD.
STUART, FL 49994 US

Name and Address of New Registered Agent:

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:

Title:	MGRM	( ) Delete
Name:	WUYCHECK, DANIEL	
Address:	3110 LOST TREE BLVD.	
City-St-Zip:	FT. PIERCE, FL 34981 US	
Title:	MGRM	( ) Delete
Name:	LEONARD, JAMES T	
Address:	10101 CROSBY PLACE	
City-St-Zip:	PORT ST. LUCIE, FL 34986 US	
Title:	MGRM	( ) Delete
Name:	DEL ROCCO, FRANCIS J JR.	
Address:	2170 N.W. 18 DRIVE	
City-St-Zip:	STUART, FL 34994 US	
Title:	MGRM	( ) Delete
Name:	ALLEN, ARTHUR	
Address:	9604 ENCLAVE PLACE	
City-St-Zip:	PORT ST. LUCIE, FL 34986	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: ARTHUR H. ALLEN MGRM 02/14/2006

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