

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000022080

FILED
Mar 28, 2006
Secretary of State

Entity Name: GROUPER MANAGEMENT, LLC

Current Principal Place of Business:

C/O CARLTON FIELDS, P.A.
100 S.E. 2ND ST., SUITE 4000
MIAMI, FL 33131

New Principal Place of Business:

765 CRANDON BLVD.
PH9
KEY BYSCANE, FL 33149

Current Mailing Address:

C/O CARLTON FIELDS, P.A.
100 S.E. 2ND ST., SUITE 4000
MIAMI, FL 33131

New Mailing Address:

765 CRANDON BLVD.
PH9
KEY BYSCANE, FL 33149

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CFRA, LLC
COPORATE CENTER THREE AT INTERNATIONAL PL
4221 W. BOY SCOUT BOULEVARD, 10TH FLOOR
TAMPA, FL 336075736 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: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: FUENTES, ANDREINA
Address: 765 CRANDON BLVD., PH9
City-St-Zip: KEY BYSCANE, FL 33149

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: ANDREINA FUENTES MGR 03/28/2006

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