2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 15, 2009
Secretary of State

DOCUMENT# L05000026002

Entity Name: THE OUTDOOR GROUP, LLC

Current Principal Place of Business:

1639 MEDICAL CENTER PARKWAY
SUITE 200
MURFREESBORO, TN 37129 US

New Principal Place of Business:

Current Mailing Address:

1639 MEDICAL CENTER PARKWAY
SUITE 200
MURFREESBORO, TN 37129 US

New Mailing Address:

FEI Number: 32-0143027 **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:

DOWD, JOHN
285 HARBOR BLVD, SUITE A
DESTIN, FL 32541 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: CANTRELL, GREGORY Z
Address: 3431 MEODOWCREST DRIVE
City-St-Zip: MURFREESBORO, TN 37129 US

Title: MGRM ( ) Delete
Name: CROWSON, THOMAS D
Address: 1 DOUG FORD ROAD
City-St-Zip: PENSACOLA, FL 32507 US

ADDITIONS/CHANGES:

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 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: GREGORY Z. CANTRELL MGMR 06/15/2009

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