

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000027724

FILED  
Apr 29, 2011  
Secretary of State

Entity Name: NAVIGATOR MANAGEMENT GROUP, LLC

**Current Principal Place of Business:**

14951 WALDEN SPRINGS WAY, UNIT 502  
JACKSONVILLE, FL 32258

**New Principal Place of Business:**

14951 WALDEN SPRINGS WAY  
UNIT 502  
JACKSONVILLE, FL 32258

**Current Mailing Address:**

14951 WALDEN SPRINGS WAY, UNIT 502  
JACKSONVILLE, FL 32258

**New Mailing Address:**

14951 WALDEN SPRINGS WAY  
UNIT 502  
JACKSONVILLE, FL 32258

FEI Number: 75-3185760

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HELLWIG, PETER M  
14951 WALDEN SPRINGS WAY  
SUITE 502  
JACKSONVILLE, FL 32258 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: MGR  
Name: HELLWIG, PETER M  
Address: 14951 WALDEN SPRINGS WAY #502  
City-St-Zip: JACKSONVILLE, FL 32258

Title: MGR  
Name: HELLWIG, BREE E  
Address: 14951 WALDEN SPRINGS WAY #502  
City-St-Zip: JACKSONVILLE, FL 32258

I hereby 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: PETER M HELLWIG

MGR

04/29/2011

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