2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000034812

Address:

City-St-Zip:

PEMBROKE PINES, FL 33025 US

Entity Name: EPHESIANS REAL ESTATE GROUP, LLC

FILED May 01, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 10506 SW 12TH MANOR PEMBROKE PINES, FL 33025 US **Current Mailing Address: New Mailing Address:** P O BOX 245762 PEMBROKE PINES, FL 33024 US FEI Number: 20-2713507 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: Name and Address of New Registered Agent: WILLIAMS, MARSHA R 10506 SW 12TH AVENUE US PEMBROKE PINES, FL FL 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete WILLIAMS, MARSHA R Name: Name: 10506 SW 12TH MANOR Address: Address: City-St-Zip: PEMBROKE PINES, FL 33025 US City-St-Zip: Title: MGRM () Delete Title: MGRM (X) Change () Addition WILLIAMS, HARRY A Name: WILLIAMS, HARRY A Name: Address: 10506 SW 12TH MANOR Address: 10506 SW 12TH MANOR City-St-Zip: PEMBRIOKE PINES, FL 33025 US City-St-Zip: PEMBROKE PINES, FL 33025 US Title: MGRM () Delete Title: () Change () Addition WILLIAMS, HARRY A II Name: Name: 10506 SW 12TH MANOR Address: Address: City-St-Zip: PEMBROKE PINES, FL 33025 US City-St-Zip: Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: WILLIAMS, VERNON Name: WILLIAMS, VERNON L 10506 SW 12TH MANOR 10506 SW 12TH MANOR Address: Address: City-St-Zip: PEMBROKE PINES, FL 33025 US City-St-Zip: PEMBROKE PINES, FL 33025 US Title: MGRM () Delete Title: MGRM (X) Change () Addition WILLIAMS, FRANKLIN WILLIAMS, FRANKLIN H Name: Name: 10506 SW 12TH MANOR 10506 SW 12TH MANOR

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.

Address:

City-St-Zip:

PEMBROKE PINES, FL 33025 US

SIGNATURE: MARSHAR WILLIAMS **MGRM** 05/01/2006