2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000038211

City-St-Zip:

FORT WALTON BEACH, FL 32547 US

Entity Name: SIX TALENTS INVESTMENT GROUP, LLC

FILED Jan 20, 2009 Secretary of State

Ourself Brigain at Black of Business			New Principal Place of Business:	
Current	rincipal Place of Bus	iness:	New Principal Pla	ce of Business:
	PARKWAY SE ON BEACH, FL 32548	US		
Current Mailing Address:			New Mailing Address:	
111 BEAL PARKWAY SE FT WALTON BEACH, FL 32548 US				
FEI Number	: 54-2171746 FEI Nu	mber Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	Address of Current	Registered Agent:	Name and Address	s of New Registered Agent:
111 BEAL	. REALTY CORP. PARKWAY SE ON BEACH, FL 32548	US		
	e named entity submits e of Florida.	this statement for the p	ourpose of changing its registe	ered office or registered agent, or both,
SIGNATUI	RE:			
	Electronic Signa	ture of Registered Ag	ent	Date
MANAGING	MEMBERS/MANAGERS:		ADDITIONS/CHANGES	:
Title: Name: Address: City-St-Zip:	MGRM () Delete HUDGENS, ROBERT S 256 VENTURA CIRCLE N FORT WALTON BEACH,		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGRM () Delete PENNINGTON, BRIAN S 48 COUNTRY CLUB ROA SHALIMAR, FL 32579 U		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGRM () Delete GETTING, JAMES A 2568 PALM SHORES DR SHALIMAR, FL 32579 U		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGRM () Delete MINTER, CHARLES F JR 20 PEBBLE BEACH DRIN SHALIMAR, FL 32579 U	/E	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	MGRM () Delete WALKER, K. WAYNE 906 AVALON LANE SHALIMAR, FL 32579 U	S	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address:	MGRM () Delete JENNINGS, WM PAUL 619 I AKEVIEW ROAD N	w	Title: Name: Address:	() Change () Addition

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.

City-St-Zip:

SIGNATURE: ROBERT S HUDGENS MGRM 01/20/2009