

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 09, 2006 8:00 am**  
**Secretary of State**

01-09-2006 90051 049 \*\*\*\*50.00

|   |   |   |  |  |   |
|---|---|---|--|--|---|
| <b>DOCUMENT # L05000041346</b>  |   |   |  |  |   |
| <b>1. Entity Name</b><br>THE BRADLEY GROUP, LLC   |   |   |  |  |   |
| <b>Principal Place of Business</b><br>400 S PALMETTO AVE<br>SANFORD, FL 32771   |   |   | <b>Mailing Address</b><br>400 S PALMETTO AVE<br>SANFORD, FL 32771  |  |   |
| <b>2. Principal Place of Business</b>   |   | <b>3. Mailing Address</b>   |  |  |   |
| Suite, Apt. #, etc.   |   | Suite, Apt. #, etc.   |  |  |   |
| City & State  |   | City & State  |  | <b>4. FEI Number</b><br>71-0981405   |   |
| Zip   |   | Country   |  | Applied For<br>Not Applicable  |   |
| Zip   |   | Country   |  | <b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b> |   |
| <b>6. Name and Address of Current Registered Agent</b>  |   |   | <b>7. Name and Address of New Registered Agent</b>                 |  |   |
| BRODEUR, JASON<br>400 S. PALMETTO AVENUE<br>SANFORD, FL 32771   |   |   | Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City |  |   |
|   |   |   | FL Zip Code  |  |   |
| <b>8. 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. I am familiar with, and accept the obligations of registered agent.</b>  |   |   |  |  |   |
| SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) DATE _____  |   |   |  |  |   |
| Filing Fee is \$50.00<br>Due by May 1, 2006   |   | Make check payable to<br>Florida Department of State              |  |  |   |
| <b>9. MANAGING MEMBERS/MANAGERS</b>   |   |   | <b>10. ADDITIONS/CHANGES</b>                                       |  |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | MGR<br>BRODEUR, JASON<br>684 VISTAWILLA DRIVE<br>WINTER SPRINGS, FL 32708 | <input type="checkbox"/> Delete                                   |  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | MGR<br>BRODEUR, Jason<br>400 S. Palmetto Ave<br>Sanford, FL 32771 |
|   |   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |  |  |   |
|   |   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |  |  |   |
|   |   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |  |  |   |
|   |   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |  |  |   |
|   |   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |  |  |   |
| <b>11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.</b> |   |   |  |  |   |
| <b>SIGNATURE:</b> <i>Jason Brodeur</i>  |   |   | 1/4/2006 407-963-9576  |  |   |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE   |   |   | Date Daytime Phone #   |  |   |