## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000051762

Name:

Address:

City-St-Zip:

1514 NE 14TH STREET

GAINESVILLE, FL 32601 US

Entity Name: POINT FREEDOM INVESTMENT GROUP LLC

FILED Jan 21, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business: 5328 NW 9TH LANE** GAINESVILLE, FL 32605 US **Current Mailing Address: New Mailing Address:** 5328 NW 9TH LANE GAINESVILLE, FL 32605 US FEI Number: 20-2890264 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KLEIN, MICHAEL R 5328 NW 9TH LANE GAINESVILLE, FL 32605 US 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 KLEIN, MICHAEL R Name: Name: Address: 5328 NW 9TH LANE Address: City-St-Zip: GAINESVILLE, FL 32605 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: BARNES, RICK Name: Address: 1809 SW 44TH AVENUE Address: City-St-Zip: GAINESVILLE, FL 32608 US City-St-Zip: Title: MGRM () Delete Title: MGRM (X) Change ( ) Addition LARSON, JEREMY O'SULLIVAN, JAMES P Name: Name: 7008 NW 52ND TERRACE Address: Address: 1514 NE 14TH STREET City-St-Zip: GAINESVILLE, FL 32653 US City-St-Zip: GAINESVILLE, FL 32601 US Title: MGRM (X) Delete Title: () Change () Addition O'SULLIVAN, JAMES P

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.

Name:

Address:

City-St-Zip:

SIGNATURE: MICHAEL R. KLEIN **MGRM** 01/21/2009