## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # L05000102588

1. Entity Name
OSPREY GROUP, LLC



Principal Place of Business

5390 PENNOCK POINT ROAD JUPITER, FL 33458

Mailing Address

5390 PENNOCK POINT ROAD JUPITER, FL 33458

FILED
Mar 09, 2007 08:00 AM
Secretary of State



01132007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number		Applied For
20-3617650	 	Not Applicable
5. Certificate of Status Desired	\$5.00 Additional	

6. Name and Address of Current Registered Agent

DELEO, RALPH 1194 SW LIVE OAK COVE PORT ST. LUCIE, FL 34986

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

<ol> <li>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.</li> </ol>				
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE	
F	iling Fee is \$50.00 ue by May 1, 2007			
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MENG, PHILIP 1057 LAKE WELLDONA DRIVE ORLANDO, FL 32806			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MENG, ERIC 144 BAYBERRY CIRCLE JUPITER, FL 33458		000000660705 03/20/07-80011-010 50.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE	
TITLE NAME STREET ADORESS CITY-ST-ZIP		IN T	HIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADORESS CITY-ST-ZIP			`	
11. I hereby of indicated limited lial	perify that the information supplied with this filing does not on this report is true and accurate and that my signature shollity company or the receiver or trustee empowered to execute the second s	ualify for the exemptions contained in Chapter 119, all have the same legal effect as if made under oat ute this report as required by Chapter 608. Florida	Florida Statutes, I further certify that the information h; that I am a managing member or manager of the Statutes.	