2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

SIGNATURE:

Mar 23, 2006 8:00 am Secretary of State **DOCUMENT # L05000107540** 02-02-2006 90092 050 ****50.00 1. Entity Name GROUP OF FOUR, LLC Principal Place of Business Mailing Address 30003060 2889 WHISPER LAKE DRIVE GULF BREEZE FL 32563 2889 WHISPER LAKE DRIVE GULF BREEZE FL 32563 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E083 (10/05) City & State City & State Applied For Ζiρ Zip Country Country \$5.00 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WIEGNER, ROGER Street Address (P.O. Box Number is Not Acceptable) 2889 WHISPER LAKE DRIVE **GULF BREEZE FL 32563** 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. (NOTE, Replaced Agent signature required when rainstaling) DATE FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2005 MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES nne MGRM Delete ☐ Channe ■ Addition NAME NAME WIEGNER, ROGER STREET ADDRESS 2889 WHISPER LAKE DRIVE STREET ADDRESS CITY-ST-ZIP GULF BREEZE FL 32563 CITY-SI-ZIP TITLE MGRM ☐ Delete IIILE ☐ Change ☐ Addition MILLSTEAD, DAVID STREET ADDRESS 224 NORTH CIRCLE STREET ADDRESS CITY-ST-7IP FAIRHOPE AL 36532 CITY-ST-ZIP Delete MGRM ☐ Addition NAME TOWNSEND, JEFF NAME STREET ADDRESS 98 HIGHPOINT DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP GULF BREEZE FL 32561 MGRM Delete TITLE ☐ Addition Channe ORLICH, ROBERT NAME MALK STREET ADDRESS 934 WEST LAGOON STREET ADDRESS CITY-ST-Z:P GULF SHORES AL 36542 CITY-ST-ZIP ☐ Delete TITLE ☐ Chance ■ Addition MALKE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Defete TITLE Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 11. I hereby certify that the information supplied with this fitting does not qualify for the exemptions contained in Section 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 employered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE AND TYPED OR PRINTED NAME OF BIGHING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

FILED

05000107540

Christina Frye-Simmons Office Manager

march 17,2000

Please see attached correction made;

the PEI # LAS been written

The proper space (Block 4)

Thank you,



March 8, 2006

GROUP OF FOUR, LLC 2889 WHISPER LAKE DRIVE GULF BREEZE, FL 32563

Subject: GROUP OF FOUR, LLC

Reference Number:

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report has not been filed and a

copy is being returned for the following correction(s):

Ĺ05000107540

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/cj ANNUAL REPORTS SECTION

FLORIDA DEPARTMENT OF STATE Division of Corporations

February 6, 2006

GROUP OF FOUR, LLC 2889 WHISPER LAKE DRIVE GULF-BREEZE, FL 32563

Subject: GROUP OF FOUR, LLC

Reference Number:

L05000107540

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

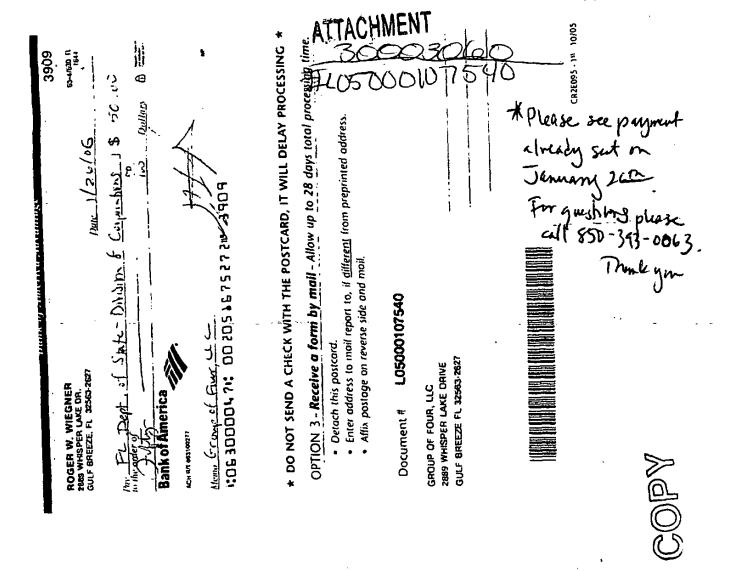
The annual report/uniform business report must be signed by a managing member, manager or an authorized representative of the limited liability company.

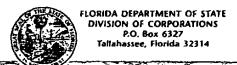
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