

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000113513

Entity Name: TWOGROUP, LLC

FILED
Jan 09, 2008
Secretary of State

Current Principal Place of Business:

951 NE 130TH AVE.
OXFORD, FL 34484

New Principal Place of Business:

9202 NW 26TH ST.
WILDWOOD, FL 34785

Current Mailing Address:

951 NE 130TH AVE.
OXFORD, FL 34484

New Mailing Address:

9202 NW 26TH ST.
WILDWOOD, FL 34785

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEEPY, MICHAEL
951 NE 130TH AVE.
OXFORD, FL 34484 US

Name and Address of New Registered Agent:

STEEPY, MICHAEL
9202 NW 26TH ST.
WILDWOOD, FL 34785 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: MICHAEL T. STEEPY

01/09/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: STEEPY, KATHLEEN A
Address: 951 NE 130TH AVE.
City-St-Zip: OXFORD, FL 34484

Title: MGR () Delete
Name: STEEPY, MICHAEL T
Address: 951 NE 130TH AVE.
City-St-Zip: OXFORD, FL 34484

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: STEEPY, KATHLEEN A
Address: 9202 NW 26TH ST.
City-St-Zip: WILDWOOD, FL 34785

Title: MGR (X) Change () Addition
Name: STEEPY, MICHAEL T
Address: 9202 NW 26TH ST.
City-St-Zip: WILDWOOD, FL 34785

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.

SIGNATURE: MICHAEL T. STEEPY

MGR

01/09/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date