2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 24, 2007
Secretary of State

DOCUMENT# L05000121079

Entity Name: TECHNICAL INNOVATIONS GROUP, LLC

Current Principal Place of Business:

1039 STEPHEN DRIVE
NICEVILLE, FL 32578 US

New Principal Place of Business:

Current Mailing Address:

1039 STEPHEN DRIVE
NICEVILLE, FL 32578 US

New Mailing Address:

FEI Number: 59-3640293 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COOK, DIANE E
1039 STEPHEN DRIVE
NICEVILLE, FL 32578 US

Name and Address of New Registered Agent:

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:

Title:	MGRM	( ) Delete
Name:	COOK, DIANE E	
Address:	1039 STEPHEN DRIVE	
City-St-Zip:	NICEVILLE, FL 32578 US	
Title:	MGRM	( ) Delete
Name:	COOK, TIMOTHY J	
Address:	1039 STEPHEN DRIVE	
City-St-Zip:	NICEVILLE, FL 32578 US	
Title:	MGRM	( ) Delete
Name:	COOK, KEVIN M	
Address:	1039 STEPHEN DRIVE	
City-St-Zip:	NICEVILLE, FL 32578 US	
Title:	MGRM	( ) Delete
Name:	BRANSCOME, DAVID A	
Address:	205 GRACIE LANE	
City-St-Zip:	NICEVILLE, FL 32578 US	
Title:	MGRM	( ) Delete
Name:	GIBSON, KENN	
Address:	1039 STEPHEN DRIVE	
City-St-Zip:	NICEVILLE, FL 32578 US	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: DIANE E COOK MGRM 04/24/2007

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