2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 04, 2007
Secretary of State

DOCUMENT# L05000123661

Entity Name: ST. ARMANDS GROUP, LLC

Current Principal Place of Business:

4251 SPRUCE CREEK ROAD, SUITE I-1
PORT ORANGE, FL 32127

New Principal Place of Business:

4251 SPRUCE CREEK ROAD, SUITE 1-H
PORT ORANGE, FL 32127

Current Mailing Address:

4251 SPRUCE CREEK ROAD, SUITE I-1
PORT ORANGE, FL 32127

New Mailing Address:

4251 SPRUCE CREEK ROAD, SUITE 1-H
PORT ORANGE, FL 32127

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHEPARD, CLIFFORD B
111 S. MAITLAND AVENUE
MAITLAND, FL 32794 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: ASTORINO, ROBERT L
Address: 4251 SPRUCE CREEK ROAD, SUITE I-1
City-St-Zip: PORT ORANGE, FL 32127

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: ASTORINO, ROBERT L
Address: 4251 SPRUCE CREEK ROAD, SUITE 1-H
City-St-Zip: PORT ORANGE, FL 32127

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT L ASTORINO MR 04/04/2007

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