

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000007809

FILED
Jan 29, 2007
Secretary of State

Entity Name: LIONSHEAD INVESTMENT GROUP, LLC

Current Principal Place of Business:

5119 NW 50TH PLACE
GAINESVILLE, FL 32653

New Principal Place of Business:

408 WEST UNIVERSITY AVE.
408
GAINESVILLE, FL 32601

Current Mailing Address:

5119 NW 50TH PLACE
GAINESVILLE, FL 32653

New Mailing Address:

408 WEST UNIVERSITY AVE., STE 408
408
GAINESVILLE, FL 32601

FEI Number: 20-4714464

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONROY, MICHAEL
5119 NW 50TH PLACE
GAINESVILLE, FL 32653 US

Name and Address of New Registered Agent:

CONROY, MICHAEL A
408 WEST UNIVERSITY AVE.
STE 408
GAINESVILLE, FL 32601 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 A. CONROY

01/29/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CONROY, MICHAEL
Address: 5119 NW 50TH PLACE
City-St-Zip: GAINESVILLE, FL 32653

Title: MGRM () Delete
Name: ZEIG, BRYAN
Address: 7346 SW 84TH DRIVE
City-St-Zip: GAINESVILLE, FL 32608

ADDITIONS/CHANGES:

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 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 A. CONROY

MGRM

01/29/2007

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