## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L06000024994

Entity Name: QI GROUP, LLC

Address:

City-St-Zip:

FILED Feb 05, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 4229 SW HIGH MEADOWS AVENUE PALM CITY, FL 349903726 US **Current Mailing Address: New Mailing Address:** 4229 SW HIGH MEADOWS AVENUE PALM CITY, FL 349903726 US FEI Number: 20-4317360 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LOZEAU, LOUIS E JR. 1002 SE MONTEREY COMMONS BLVD. SUITE 100 STUART, FL 34996 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete MACKIE, STEPHAN C Name: Name: 4229 SW HIGH MEADOWS AVENUE Address: Address: City-St-Zip: PALM CITY, FL 349903726 US City-St-Zip: Title: Title: MGRM ( ) Change (X) Addition ( ) Delete Name: Name: WALLIN, RANDAL C Address: Address: 4229 SW HIGH MEADOWS AVENUE City-St-Zip: City-St-Zip: PALM CITY, FL 34990 Title: () Delete Title: MGRM ( ) Change (X) Addition KATRI, MICHAEL Name: Name: 4229 SW HIGH MEADOWS AVENUE Address: Address: City-St-Zip: City-St-Zip: PALM CITY, FL 34990 Title: () Delete Title: MGRM ( ) Change (X) Addition Name: Name: KATRI, RYAN M Address: Address: 4229 SW HIGH MEADOWS AVENUE City-St-Zip: City-St-Zip: PALM CITY, FL 34990 Title: () Delete Title: MGRM ( ) Change (X) Addition FOX, GEORGE Name: Name:

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.

Address:

City-St-Zip:

4229 SW HIGH MEADOWS AVENUE

PALM CITY, FL 34990

SIGNATURE: GEORGE FOX MGRM 02/05/2008