

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000060613

**FILED**  
**Mar 01, 2011**  
**Secretary of State**

**Entity Name:** THE ROOKERY GROUP, LLC

**Current Principal Place of Business:**

26651 ROOKERY LAKE DRIVE  
BONITA SPRINGS, FL 34134

**New Principal Place of Business:**

**Current Mailing Address:**

26651 ROOKERY LAKE DRIVE  
BONITA SPRINGS, FL 34134

**New Mailing Address:**

**FEI Number:** 51-0588307

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LONG, JR., BERNARD J  
26651 ROOKERY LAKE DRIVE  
BONITA SPRINGS, FL 34134 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  
**Name:** AKITT, JOHN E  
**Address:** 26671 ROOKERY LAKE DRIVE  
**City-St-Zip:** BONITA SPRINGS, FL 34134

**Title:** MR.  
**Name:** LONG, JR., BERNARD J  
**Address:** 26651 ROOKERY LAKE DRIVE  
**City-St-Zip:** BONITA SPRINGS, FL 34134

**Title:** MR.  
**Name:** POST, THOMAS S  
**Address:** 26690 ROOKERY LAKE DRIVE  
**City-St-Zip:** BONITA SPRINGS, FL 34134

**Title:** MR.  
**Name:** POTTER, ROBERT G  
**Address:** 8 MUIRFIELD LANE  
**City-St-Zip:** ST. LOUIS, MO 63141

**Title:** MR.  
**Name:** SATRUM, JERRY  
**Address:** 545 OLD COBBLESTONE DRIVE  
**City-St-Zip:** ATLANTA, GA 30350

I hereby 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:** JOHN E AKITT

MGRM

03/01/2011

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