
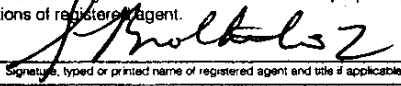


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 10, 2008 8:00 am
Secretary of State

01-10-2008 90019 049 ***143.75

DOCUMENT # L06000072957 1. Entity Name THE STAN GROUP LLC					
Principal Place of Business 12 INWOOD WAY INDIAN HARBOUR BEACH, FL 32937			Mailing Address 12 INWOOD WAY INDIAN HARBOUR BEACH, FL 32937		
2. Principal Place of Business - No P.O. Box # 307 Palm Ct.		3. Mailing Address 307 Palm Ct.			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Indianalantic, FL		City & State Indianalantic, FL		4. FEI Number 20-5249525	
Zip 32903		Country USA		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$5.00 Additional Fee Required			
6. Name and Address of Current Registered Agent BROTHERTON, STANLEY L JR. 12 INWOOD WAY INDIAN HARBOUR BEACH, FL 32937			7. Name and Address of New Registered Agent Name Stanley L. Brotherton Jr. Street Address (P.O. Box Number is Not Acceptable) 307 Palm Ct. City Indianalantic FL Zip Code 32903		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  Stanley L. Brotherton Sr. 1-7-2008 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BROTHERTON, STANLEY L JR. 12 INWOOD WAY INDIAN HARBOUR BEACH, FL 32937 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	mGR Brotherton, Stanley L. Jr. 307 Palm Ct. Indianalantic, FL 32903 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BROTHERTON, STANLEY L III 1532 CROSSWIND CIRCLE ORLANDO, FL 32825 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	mGRM Brotherton Stanley L III 101 Riverside Dr Cape Canaveral, FL 32920 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  Stanley L. Brotherton, Jr. 1-7-2008 321 373 1935 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>					

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