

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000074450

Entity Name: NORTHROP GEORGIA, LLC

FILED
Jan 11, 2008
Secretary of State

Current Principal Place of Business:

6821 PALISADES PARK CT., SUITE 1
FT. MYERS, FL 33912

New Principal Place of Business:

13700 SIX MILE CYPRESS PKWY.
SUITE 2
FT. MYERS, FL 33912

Current Mailing Address:

6821 PALISADES PARK CT., SUITE 1
FT. MYERS, FL 33912

New Mailing Address:

13700 SIX MILE CYPRESS PKWY.
SUITE 2
FT. MYERS, FL 33912

FEI Number: 02-0782480

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NORTHROP, MARK
6821 PALISADES PARK CT., SUITE 1
FT. MYERS, FL 33912 US

Name and Address of New Registered Agent:

NORTHROP, MARK
13700 SIX MILE CYPRESS PKWY.
SUITE 2
FT. MYERS, FL 33912 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: MARK NORTHROP

01/11/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: NORTHROP, MARK
Address: 6821 PALISADES PARK CT., SUITE 1
City-St-Zip: FT. MYERS, FL 33912

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: NORTHROP, MARK
Address: 13700 SIX MILE CYPRESS PKWY. SUITE 2
City-St-Zip: FT. MYERS, FL 33912

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.

SIGNATURE: MARK NORTHROP

RA

01/11/2008

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