2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000077023

Entity Name: WORKGIANT INVESTMENT GROUP, LLC.

FILED Jan 16, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
	ANTATION PRI ERS, FL 3391:			
Current Mailing Address:			New Mailing Address:	
	ANTATION PRI ERS, FL 3391:			
FEI Number	: 20-5356401	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
13571 MC FORT MY	GREGOR BLV ERS, FL 3391:	9 US		
	e named entity : e of Florida.	submits this statement for the p	urpose of changing its register	ed office or registered agent, or both,
SIGNATUI	RE:			
	Electror	ic Signature of Registered Age	ent	Date
MANAGING	MEMBERS/MANA	GERS:	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	WALLEN, MAR	TION PRESERVE CIR	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	IAVARONI, RIC	R RIDGE LOOP	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGRM () COURT, JASON 11156 LAKELA FORT MYERS,	ND CIR	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	COURT, LYNN	Delete GTONIA PALM WAY #1138 FL 33966 US	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGRM () COURT, AMY 3275 LENOX R ATLANTA, GA		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGRM () TYSON, JEFF P.O. BOX 0829 FORT MYERS,		Title: Name: Address: City-St-Zip:	() Change () Addition

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: MARK A WALLEN MGRM 01/16/2007