

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000103649

FILED  
Feb 26, 2009  
Secretary of State

Entity Name: CYGNUS CAPITAL MANAGEMENT GROUP, LLC

**Current Principal Place of Business:**

365 AVENIDA DE PARADISIO  
SARASOTA, FL 34242 US

**New Principal Place of Business:**

**Current Mailing Address:**

365 AVENIDA DE PARADISIO  
SARASOTA, FL 34242 US

**New Mailing Address:**

FEI Number: 26-1591397

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BRUCE, ROBERT  
5519 CALLE DEL VERANO  
SARASOTA, FL 34242 US

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

BRUCE, ROBERT  
365 AVENIDA DE PARADISIO  
SARASOTA, FL 34242 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: ROBERT D. BRUCE

02/26/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: DU BUIS, STEPHEN  
Address: 6251 69TH STREET EAST  
City-St-Zip: PALMETTO, FL 34221 US

Title: MGRM ( ) Delete  
Name: BRUCE, ROBERT D  
Address: 3946 43RD STREET S., UNIT #3  
City-St-Zip: ST. PETERSBURG, FL 33711 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM (X) Change ( ) Addition  
Name: BRUCE, ROBERT D  
Address: 365 AVENIDA DE PARADISIO  
City-St-Zip: SARASOTA, FL 34242 US

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: ROBERT D. BRUCE

MGRM

02/26/2009

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