2006 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L09434

1. Entity Name THE LIST COMPANIES GROUP, INC.



Principal Place of Business

223 SUNSET AVE

STE 110 PALM BEACH, FL 33480 Mailing Address

223 SUNSET AVE **STE 110**

PALM BEACH, FL 33480

FILED Apr 11, 2006 8:00 am Secretary of State

04-11-2006 90117 027 ***150.00



03272006

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0146511

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LIST, MARTIN A. 223 SUNSET AVE STE 110 PALM BEACH, FL 33480

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| | named entity submits this statement for the pions of registered agent. | urpose of changing its register | ed office or r | egistered agent, or bo | oth, in the State of Florida. I am familiar with, and accept |
|--|--|--|-------------------|--------------------------------|--|
| SIGNATURE. | Signature, typed or printed name of registered agent and title it | applicable. (NOTE: Registere | d Agent signature | required when reinstating) | DATE |
| | E NOWI!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00 | Election Campaign Finar Trust Fund Contribution. | ncing | \$5.00 May Be Added to Fees | |
| 10. | OFFICERS AND DIREC | TORS | | | · · · · · · · · · · · · · · · · · · · |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DPT LIST, MARTIN A. 223 SUNSET AVE STE., 110 PALM BEACH, FL | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | |
| TITLE | | | 1 | | |

12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-7IP