

2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT

**FILED**  
**Aug 31, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # L97000000820

1. Entity Name  
AGE OF RENAISSANCE GROUP, L.C.



Principal Place of Business  
5629 NW 69TH LN.  
GAINESVILLE, FL 32653

Mailing Address  
PO BOX 357238  
GAINESVILLE, FL 32635



08302006No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-3475100

Applied For  
Not Applicable

5. Certificate of Status Desired

☒ \$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

NICHOLS, TED  
5629 NW 69TH LN.  
GAINESVILLE, FL 32653-7020

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

Filing Fee is \$50.00  
Due by September 6, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR NICHOLS, TED 5629 NW 69TH LN. GAINESVILLE, FL 326537020
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08/31/06-80004-009 55.00

**DO NOT WRITE  
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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: \_\_\_\_\_

*Ted Nichols* TED NICHOLS

8-30-06 3523713113