2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000000866

Entity Name: THE SPARTAN GROUP, L.L.C.

FILED Feb 19, 2006 Secretary of State

3860 COASTAL HWY ST AUGUSTINE, FL 32084

Current Mailing Address: New Mailing Address:

3860 COASTAL HWY ST AUGUSTINE, FL 32084

FEI Number: 59-3565014 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ALEXANDER, KERN ESQ SCHMIDT, ROBERT K MGRM
1005 SW SECOND AVENUE 3860 COASTAL HWY
CANNESY ILLE EL 3301 LIS ST ALIGHSTINE EL 33084

GAINESVILLE, FL 32601 US ST. AUGUSTINE, FL 32084 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: KEVIN SCHMIDT 02/19/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 SCHMIDT, ROBERT K
 Name:

 Address:
 3860 COASTAL HWY
 Address:

 City-St-Zip:
 ST AUGUSTINE, FL 32084
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 BOVA, ROBERT F
 Name:

 Address:
 441 BELGRAVE LANE
 Address:

 City-St-Zip:
 TUCKER, GA 30084
 City-St-Zip:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

Name: JENNINGS, AL B Name: JENNINGS, AL B

 Address:
 3501 SEABROOK ISLAND RD
 Address:
 2735 MAGNOLIA WOODS DRIVE

 City-St-Zip:
 SEABROOK ISLAND, SC 29455
 City-St-Zip:
 MT. PLEASANT, SC 29464

Title: MGRM () Delete Title: () Change () Addition

 Name:
 WARDEN, WILLIAM R
 Name:

 Address:
 5710 NORTH HILLBROOKE TRACE
 Address:

 City-St-Zip:
 ALPHARETTA, GA 30005
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 KAMM, JEFFREY K
 Name:

 Address:
 13959 DAVY CT
 Address:

 City-St-Zip:
 ROSEMONT, MN 55068
 City-St-Zip:

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: KEVIN SCHMIDT MGRM 02/19/2006