⁻ 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L99000008412

1. Entity Name
THE HOGAN GROUP, L.L.C.

Principal Place of Business	Mailing Address
108 FOREST AVE. BOX 447 LOCUST VALLEY, NY 11560	108 FOREST AVE. BOX 447 LOCUST VALLEY, NY 11560

DO NOT WRITE IN THIS SPACE

07092006 No Chg-LLC   CR2E083 (11/05)

4. FEI Number 22-3695155	Applied For Not Applicable
5. Certificate of Status Desired ☐	**$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

HOGAN, HOWARD T JR
309 SUNSET DRIVE
FORT LAUDERDALE, FL 33301

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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	MGR
NAME	HOGAN, HOWARD T JR
STREET ADDRESS	108 FOREST AVE.
CITY-ST-ZIP	LOCUST VALLEY, NY 11560
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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09/11/06-80005-006 50.00

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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: _H. J. Hogan, Jr_   8/31/06   5/6-759-4270
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #