

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000008432

FILED
Apr 25, 2006
Secretary of State

Entity Name: PURVIS GRAY TECHNOLOGY GROUP, L.L.C.

Current Principal Place of Business:

222 N.E. 1ST STREET
GAINESVILLE, FL 32601

New Principal Place of Business:

222 NE 1ST STREET
GAINESVILLE, FL 32601

Current Mailing Address:

P.O. BOX 23999
GAINESVILLE, FL 32602

New Mailing Address:

FEI Number: 59-3609423

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, JOHN M
222 N.E. 1ST STREET
GAINESVILLE, FL 32601 US

Name and Address of New Registered Agent:

WILLIAMS, JOHN M
222 NE 1ST STREET
GAINESVILLE, FL 32601 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: JOHN MICHAEL WILLIAMS

04/25/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: PURVIS, GRAY AND COM, PANY
Address: 222 NE 2ST STREET
City-St-Zip: GAINESVILLE, FL 32601

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PURVIS, GRAY AND COM, PANY
Address: 222 NE 1ST STREET
City-St-Zip: GAINESVILLE, FL 32601

Title: MGR () Change (X) Addition
Name: BOLTON, JOE W
Address: 222 NE 1ST STREET
City-St-Zip: GAINESVILLE, FL 32601

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: JOE W. BOLTON

MGR

04/25/2006

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