

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000001450

FILED
Jan 04, 2007
Secretary of State

Entity Name: STONEHENGE CAPITAL COMPANY, LLC

Current Principal Place of Business:

191 WEST NATIONWIDE BLVD., STE. 600
COLUMBUS, OH 43215

New Principal Place of Business:

Current Mailing Address:

191 WEST NATIONWIDE BLVD., STE. 600
COLUMBUS, OH 43215

New Mailing Address:

FEI Number: 04-3694567

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ADAMEK, THOMAS J
Address: 236 THIRD STREET
City-St-Zip: BATON ROUGE, LA 70801

Title: MGR () Delete
Name: LEBLANC, GORDON S
Address: 236 THIRD STREET
City-St-Zip: BATON ROUGE, LA 70801

Title: MGR () Delete
Name: KIRBY, MICHAEL P
Address: 236 THIRD STREET
City-St-Zip: BATON ROUGE, LA 70801

Title: MGR () Delete
Name: WITTEN, JOHN P
Address: 191 WEST NATIONWIDE BLVD., STE. 600
City-St-Zip: COLUMBUS, OH 43215

Title: MGR () Delete
Name: WEBBER, DAVID B
Address: 191 WEST NATIONWIDE BLVD., STE. 600
City-St-Zip: COLUMBUS, OH 43215

Title: MGR () Delete
Name: BROOKS, RONALD D
Address: 191 WEST NATIONWIDE BLVD., STE. 600
City-St-Zip: COLUMBUS, OH 43215

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: BARRY G. GOWDY

TREA

01/04/2007

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