

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000002879

Entity Name: THE TEMPEST GROUP, LLC

FILED
Mar 24, 2006
Secretary of State

Current Principal Place of Business:

4095 STATE RD. 7
SUITE 210
LAKE WORTH, FL 33467

New Principal Place of Business:

10663 CYPRESS LAKES PRESERVE DR
LAKE WORTH, FL 33467

Current Mailing Address:

4095 STATE RD. 7
SUITE 210
LAKE WORTH, FL 33467

New Mailing Address:

FEI Number: 20-2738079

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANTICONA, ERIKA
10663 CYPRESS LAKES PRESERVE DR.
LAKE WORTH, FL 33467 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: MGRM () Delete
Name: VARRIALE, RICHARD
Address: 10663 CYPRESS LAKES PRESERVE DR.
City-St-Zip: LAKE WORTH, FL 33467

Title: MGRM () Delete
Name: ANTICONA, ERIKA
Address: 10663 CYPRESS LAKES PRESERVE DR.
City-St-Zip: LAKE WORTH, FL 33467

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

ADDITIONS/CHANGES:

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

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

Title: MGRM () Change (X) Addition
Name: ANTICONA, LUIS
Address: 10663 CYPRESS LAKES PRESERVE DR
City-St-Zip: LAKE WORTH, FL 33467

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: ERIKA ANTICONA

MGRM

03/24/2006

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