

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000102583

Entity Name: THE LINDEN GROUP, INC.

FILED  
Mar 06, 2007  
Secretary of State

## Current Principal Place of Business:

261 SE 12TH STREET  
POMPAN0 BEACH, FL 33060

## New Principal Place of Business:

## Current Mailing Address:

261 SE 12TH STREET  
POMPAN0 BEACH, FL 33060

## New Mailing Address:

FEI Number: 20-1422429

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

ROBERT J. HICKOK, P.A.  
2600 E COMMERCIAL BLVD STE 201B  
FORT LAUDERDALE, FL 33308 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: LINDEN, EDWARD W  
Address: 261 SE 12TH STREET  
City-St-Zip: POMPAN0 BEACH, FL 33060

Title: VP (X) Delete  
Name: LINDEN, JEFFERY A  
Address: 16 MACENZIE COURT  
City-St-Zip: SEWELL, NJ 08080

Title: V ( ) Delete  
Name: ARPIN, DON  
Address: 4920 N DIXIE HWY  
City-St-Zip: FORT LAUDERDALE, FL 33334

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: V P (X) Change ( ) Addition  
Name: ARPIN, DON  
Address: 4920 N DIXIE HWY  
City-St-Zip: FORT LAUDERDALE, FL 33334

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDWARD W. LINDEN

PD

03/06/2007

Electronic Signature of Signing Officer or Director

Date