2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M0400005048

Entity Name: CENTRAL SOURCE LLC

FILED Mar 24, 2009 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
	JOSE BLVD.				
STE. 417 JACKSONV	/ILLE, FL 32223	US			
Current Mailing Address:			New Mailir	New Mailing Address:	
12276 SAN	JOSE BLVD.				
STE. 417 JACKSONV	/ILLE, FL 32223	US			
FEI Number:		El Number Applied For()	FEI Number Not Appli	icable () Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and	Address of New Registered Agent:	
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US					
The above in the State		mits this statement for the pur	pose of changing it	ts registered office or registered agent, or both,	
SIGNATUR	E:				
	Electronic	Signature of Registered Agent		Date	
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	MGR () De MAST, KENT 1550 PEACHTRE S ATLANTA, GA 3030	T., N.E.	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	MGR () De HOLLAND, ROBIN 1550 PEACHTRE S ATLANTA, GA 3036	T., N.E.	Title: Name: Address: City-St-Zip:	MGR (X) Change () Addition BLENKE, JOHN 555 WEST ADAMS STREET CHICAGO, IL 606613614 US	
Title: Name: Address: City-St-Zip:	MGR () De LUNDY, LEE 475 ANTON BLVD. COSTA MESA, CA		Title: Name: Address: City-St-Zip:	MGR (X) Change () Addition ENGEL, JASON 475 ANTON BLVD COSTA MESA, CA 926267037 US	
Title: Name: Address: City-St-Zip:	MGR (X) De ENGEL, JASON 475 ANTON BLVD. COSTA MESA, CA		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGR (X) De WOLFF, DAVID 555 WEST ADAMS CHICAGO, IL 6066	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGR (X) De FRIEDLAND, GARY 555 WEST ADAMS CHICAGO, IL 6066	, STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify 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: DAVID C. VAUGHN GM 03/24/2009