2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

Apr 25, 2008 08:00 AM Secretary of State DOCUMENT # L03000007557 1. Entity Name SDI ORANGE CITY, L.L.C. Principal Place of Business Mailing Address 110 CYPRESS COURT, SUITE 2C 110 CYPRESS COURT, SUITE 2C DELTONA, FL 32745 DELTONA, FL 32745 CR2E083 (12/07) 04222008 No Chg-LLC DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-0109008 Not Applicable \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent MILLER, SOUTH & MILHAUSEN, P.A. DO NOT WRITE 2699 LEE ROAD, SUITE 120 WNTER PARK, FL 32789 IN THIS SPACE 8. 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. I am famillar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. MGR TITLE SUHL, TED E NAME 110 CYPRESS COURT, SUITE 2C STREET ADDRESS CITY-ST-7/P DELTONA, FL 32745 TITLE STREET ADDRESS ~U00000921544 CITY-ST-ZIP 05/15/08-80011-008 139.75 TITI F NAME, STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

	TYPED OR PRINTED NAME OF	BIGHING MANAGING MEMBER, OR AUTHORIZED RE	PRESENTATIVE Date	Daytime Phone #
SIGNATURE:	1eeV	Sull	141260	