2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 06, 2007
Secretary of State

DOCUMENT# L03000055041

Entity Name: CADY-WAY, L.L.C.

Current Principal Place of Business:

800 NORTH HIGHLAND AVE., SUITE 200
ORLANDO, FL 32803 US

New Principal Place of Business:

800 NORTH HIGHLAND AVENUE
SUITE 200
ORLANDO, FL 32803 US

Current Mailing Address:

800 NORTH HIGHLAND AVE., SUITE 200
ORLANDO, FL 32803 US

New Mailing Address:

800 NORTH HIGHLAND AVENUE
SUITE 200
ORLANDO, FL 32803 US

FEI Number: 20-0546013 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIAMS, WARREN E
28 WEST CENTRAL BLVD., SUITE 401
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

CARLSON, BRENDA J
800 NORTH HIGHLAND AVENUE
SUITE 200
ORLANDO, FL 32803 US

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: BRENDA J. CARLSON 03/06/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title:	MGR	( ) Delete
Name:	WILLIAMS, WARREN E MGR	
Address:	28 WEST CENTRAL BLVD, SUITE 401	
City-St-Zip:	ORLANDO, FL 32801 US	
Title:	MGR	( ) Delete
Name:	KROPP, STEVE MGR	
Address:	800 NORTH HIGHLAND AVENUE, SUITE 200	
City-St-Zip:	ORLANDO, FL 32803 US	
Title:	MGR	( ) Delete
Name:	CARLTON, CHARLES MGR	
Address:	800 NORTH HIGHLAND AVENUE, SUITE 200	
City-St-Zip:	ORLANDO, FL 32803 US	
Title:	MGR	( ) Delete
Name:	MCKINNEY, JOSEPH MGR	
Address:	800 NORTH HIGHLAND AVENUE, SUITE 200	
City-St-Zip:	ORLANDO, FL 32803 US	
Title:	MGR	( ) Delete
Name:	LAWLER, TOM MGR	
Address:	800 NORTH HIGHLAND AVENUE, SUITE 200	
City-St-Zip:	ORLANDO, FL 32803 US	
Title:	MGR	( ) Delete
Name:	TUTTLE, MILLS MGR	
Address:	800 NORTH HIGHLAND AVENUE, SUITE 200	
City-St-Zip:	ORLANDO, FL 32803 US	

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
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
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: STEVE KROPP MGR 03/06/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date