

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000015220

Entity Name: DECATUR GROUP, LLC

FILED
Jul 17, 2007
Secretary of State

Current Principal Place of Business:

420 S. ORANGE AVENUE
SUITE 1200
ORLANDO, FL 32801

New Principal Place of Business:

79 WEST ILLIANA STREET
ORLANDO, FL 32806

Current Mailing Address:

420 S. ORANGE AVENUE
SUITE 1200
ORLANDO, FL 32801

New Mailing Address:

79 WEST ILLIANA STREET
ORLANDO, FL 32806

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

WARLOW, T. PICTON IV
79 WEST ILLIANA STREET
ORLANDO, FL 32806 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: MGR () Delete
Name: SMITH, MATTHEW S
Address: 420 S. ORANGE AVENUE, SUITE 1200
City-St-Zip: ORLANDO, FL 32801 US

Title: MGR () Delete
Name: WARLOW, T. PICTON IV
Address: 79 WEST ILLIANA STREET
City-St-Zip: ORLANDO, FL 32801 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SMITH, MATTHEW S
Address: 8901 LAKE NONA ROAD
City-St-Zip: ORLANDO, FL 32827 US

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

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: MATTHEW S. SMITH

MGR

07/17/2007

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