

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L06000029686

FILED
Sep 28, 2009
Secretary of State**Entity Name:** EMERALD CAPITAL GROUP, LLC**Current Principal Place of Business:**111 NORTH MAGNOLIA AVENUE
SUITE 1600
ORLANDO, FL 32801**New Principal Place of Business:****Current Mailing Address:**111 NORTH MAGNOLIA AVENUE
SUITE 1600
ORLANDO, FL 32801**New Mailing Address:****FEI Number:** 59-3663314**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**INCORPORATING SERVICES, LTD.
1540 GLENWAY DRIVE
TALLAHASSEE, FL 32301 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: NICKERSON, CRAIG E
Address: 111 NORTH MAGNOLIA AVENUE, #1600
City-St-Zip: ORLANDO, FL 32801**Title:** S () Delete
Name: WILSON, PATRICIA T
Address: 111 NORTH MAGNOLIA AVENUE, #1600
City-St-Zip: ORLANDO, FL 32801**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES:****Title:** MGR (X) Change () Addition
Name: PINO, LAURENCE J
Address: 111 NORTH MAGNOLIA AVENUE, #1600
City-St-Zip: ORLANDO, FL 32801**Title:** S (X) Change () Addition
Name: WILSON, PATRICIA
Address: 111 NORTH MAGNOLIA AVENUE, #1600
City-St-Zip: ORLANDO, FL 32801**Title:** PT () Change (X) Addition
Name: PINO, LAUENCE J
Address: 111 NORTH MAGNOLIA AVENUE, # 1600
City-St-Zip: ORLANDO, FL 32801

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: PATRICIA WILSON

SECR

09/28/2009

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