

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000043018

FILED
Mar 31, 2009
Secretary of State

Entity Name: SILENT MAJORITY GROUP, LLC

Current Principal Place of Business:

15133 SPINNAKER COVE LANE
WINTER GARDEN, FL 34787 US

New Principal Place of Business:

922 HOME GROVE DRIVE
WINTER GARDEN, FL 34787 US

Current Mailing Address:

15133 SPINNAKER COVE LANE
WINTER GARDEN, FL 34787 US

New Mailing Address:

13750 WEST COLONIAL DRIVE
SUITES 350-402
WINTER GARDEN, FL 34787 US

FEI Number: 20-4752049

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HANSON, JEFFREY
15133 SPINNAKER COVE LANE
WINTER GARDEN, FL 34787 US

Name and Address of New Registered Agent:

IFMS, INC,
424 E CENTRAL BLVD
301
ORLANDO, FL 32801 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: DAVE PIERFY

03/31/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ARMSTRONG, SCOTT
Address: 211-D WHITE SPRUCE BLVD
City-St-Zip: ROCHESTER, NY 14623

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: RS HOLDINGS LLC,
Address: 75 SOUNDVIEW LANE
City-St-Zip: NEW CANAAN, CT 06840

Title: MGR () Change (X) Addition
Name: STANKA, JAMES R
Address: 22206 HIGHLAND KNOLLS
City-St-Zip: KATY, TX 77450

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 SHEPPARD

MGRM

03/31/2009

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