2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000122648

Entity Name: CENTRAL GROUP MANAGEMENT LLC

FILED Apr 11, 2009 Secretary of State

Current Princip	al Place of Business:	New Princip	al Place of Business

12453 S. ORANGE BLOSSOM TRAIL 12250 MENTA STREET SUITE

SUITE #105 **SUITE #100**

ORLANDO, FL 32837 ORLANDO, FL 32837

Current Mailing Address: New Mailing Address:

12453 S. ORANGE BLOSSOM TRAIL 12250 MENTA STREET SUITE #100 SUITE #105

ORLANDO, FL 32837 ORLANDO, FL 32837

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CASTORANI, BERNARDINO J CASTORANI, BERNARDINO J 12453 S ORANGE BLOSSOM TRAIL 12250 MENTA STREET **SUITE #100** SUITE #105 ORLANDO, FL 32837 US ORLANDO, FL 32837 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: BERNARDINO J CASTORANI 04/11/2009

> Electronic Signature of Registered Agent Date

> > ADDITIONS/CHANGES:

MANAGING MEMBERS/MANAGERS:

MGRM Title: () Delete

(X) Change () Addition CASTORANI, BERNARDINO J CASTORANI, BERNARDINO J Name: Name:

12453 S ORANGE BLOSSOM TRAIL SUITE #100 Address: 12250 MENTA STREET SUITE #105 Address:

City-St-Zip: ORLANDO, FL 32837 City-St-Zip: ORLANDO, FL 32837

(X) Change () Addition Title: MGR () Delete Title:

CASTORANI, LIDA I Name: CASTORANI, LIDA I Name: Address: 12453 S ORANGE BLOSSOM TRAIL SUITE #100 Address: 12250 MENTA ST SUITE 105

City-St-Zip: ORLANDO, FL 32837 City-St-Zip: ORLANDO, FL 32837

Title: () Delete Title: MGR () Change (X) Addition

Name: PAGAN, LENNIS I Name:

12250 MENTA ST SUITE #105 Address: Address:

City-St-Zip: City-St-Zip: ORLANDO, FL 32837

Title: () Delete Title: MGR () Change (X) Addition Name: Name: LOZADA, MARISOL

12250 MENTA STREET SUITE 105 Address: Address:

City-St-Zip: City-St-Zip: ORLANDO, FL 32837

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: BERNARDINO JORGE CASTORANI 04/11/2009