2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000003775

Entity Name: OMEGA I PARTNERS, LLC

5012 GREENBRIAR TRAIL

MOUNT DORA, FL 327579100

Address:

City-St-Zip:

FILED Jan 16, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 215 N EOLA DRIVE ORLANDO, FL 32801 **Current Mailing Address: New Mailing Address:** 215 N EOLA DRIVE ORLANDO, FL 32801 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: HEEKIN, JAMES F JR 215 N EÓLA DRIVE 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition MGR () Delete GARY, BEALL Name: Name: 4 WESTBROOK CORPORATE CENTER, STE. 440 Address: Address: City-St-Zip: WESTCHESTER, IL 60154 City-St-Zip: Title: MGR Title: () Delete () Change () Addition Name: BJERKEN, DAVID Name: Address: P.O. BOX 547 Address: City-St-Zip: TAVARES, FL 32778 City-St-Zip: Title: MGR () Delete Title: () Change () Addition CASSELL, JACK Name: Name: 18526 COUNTY ROAD 44A Address: Address: City-St-Zip: EUSTIS, FL 32726 City-St-Zip: () Delete Title: MGR Title: () Change () Addition Name: GURU, SAMIR Name: 1227 LAKE WHITNEY DRIVE Address: Address: City-St-Zip: WINDERMERE, FL 34786 City-St-Zip: Title: MGR () Delete Title: () Change () Addition MASCARENHAS, BORYS Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: BORYS MASCARENHAS MGR 01/16/2009