

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000068370

Entity Name: ORANGE PLAZZA, LLC

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

1803 PARK CENTER DRIVE
#215
ORLANDO, FL 32835 US

New Principal Place of Business:

1575 MAGUIRE RD
#102
OCOOE, FL 34761 US

Current Mailing Address:

1803 PARK CENTER DRIVE
#215
ORLANDO, FL 32835 US

New Mailing Address:

1575 MAGUIRE RD
#102
OCOOE, FL 34761 US

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

Name and Address of Current Registered Agent:

THE LAW OFFICES OF NICK SPRADLIN, PLLC
12000 N. DALE MABRY HIGHWAY
#110
TAMPA, FL 33618 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: MGRM () Delete
Name: LEMASTER, S. M
Address: 1803 PARK CENTER DRIVE #215
City-St-Zip: ORLANDO, FL 32835 US

Title: MGRM () Delete
Name: FORADI, SHAMAN
Address: 1803 PARK CENTER DRIVE #215
City-St-Zip: ORLANDO, FL 32835 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LEMASTER, S. M
Address: 1575 MAGUIRE RD, SUITE 102
City-St-Zip: OCOOE, FL 34761 US

Title: MGRM (X) Change () Addition
Name: FORADI, SHAMAN
Address: 1575 MAGUIRE RD, SUITE 102
City-St-Zip: OCOOE, FL 34761 US

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: SHAMAN FORADI

MNG

04/29/2009

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