

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L08000116711

FILED
May 30, 2009
Secretary of State**Entity Name:** SAI ORLANDO CS, LLC**Current Principal Place of Business:**4241 N. JOHN YOUNG PARKWAY
ORLANDO, FL 32804**New Principal Place of Business:****Current Mailing Address:**4241 N. JOHN YOUNG PARKWAY
ORLANDO, FL 32804**New Mailing Address:****FEI Number:** 65-0938818**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: SMITH, B. SCOTT
Address: 5401 E. INDEPENDENCE BLVD.
City-St-Zip: CHARLOTTE, NC 28212

Title: MGR () Delete
Name: COSPER, DAVID P
Address: 5401 E. INDEPENDENCE BLVD.
City-St-Zip: CHARLOTTE, NC 28212

Title: MGR () Delete
Name: COSS, STEPHEN K
Address: 5401 E. INDEPENDENCE BLVD.
City-St-Zip: CHARLOTTE, NC 28212

Title: MGR () Delete
Name: O'CONNOR, JOSEPH D JR
Address: 5401 E INDEPENDENCE BLVD
City-St-Zip: CHARLOTTE, NC 28212

Title: MGR () Delete
Name: RUSS, JOHN E III
Address: 5401 E INDEPENDENCE BLVD
City-St-Zip: CHARLOTTE, NC 28212

Title: MGR () Delete
Name: DOBLER, SCOTT
Address: 5401 E INDEPENDENCE BLVD
City-St-Zip: CHARLOTTE, NC 28212

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: SMITH, DAVID B
Address: 5401 E INDEPENDENCE BLVD
City-St-Zip: CHARLOTTE, NC 28212

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: SCOTT DOBLER

MGR

05/30/2009

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