2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000005137

Entity Name: ORATION CONSULTING GROUP, LLC

FILED Apr 19, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4831 DEL WEBB PKWY 9831 DEL WEBB PKWY #2402 #2402

JACKSONVILLE, FL 32256 #2402 JACKSONVILLE, FL 32256 JACKSONVILLE, FL 32256

Current Mailing Address: New Mailing Address:

4831 DEL WEBB PKWY 9831 DEL WEBB PKWY #2402 #2402

#2402 #2402 JACKSONVILLE, FL 32256 #2402 JACKSONVILLE, FL 32256

FEI Number: 59-3605622 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

._....,

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

VELLA, ORA L

VELLA, ORA L

4831 DEL MIERR BIONO #2403

4831 DEL WEBB PKWY #2402

PONTE VEDRA BEACH, FL 32082

US

9831 DEL WEBB PKWY #2402

#2402

JACKSONVILLE, FL 32256 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: 04/19/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

 Name:
 VELLA, ORA L
 Name:
 VELLA, ORA L

 Address:
 4831 DEL WEBB PKWY #2402
 Address:
 9831 DEL WEBB PKWY #2402

City-St-Zip: PONTE VEDRA BEACH, FL 32082 City-St-Zip: JACKSONVILLE, FL 32256

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: ORA L. VELLA MGRM 04/19/2009