

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000000908

Entity Name: LEVEL 5 GA, LLC

FILED
Apr 03, 2009
Secretary of State

Current Principal Place of Business:

2000 RIVEREDGE PKWY
STE 100
ATLANTA, GA 30328

New Principal Place of Business:

Current Mailing Address:

2000 RIVEREDGE PKWY
STE 100
ATLANTA, GA 30328

New Mailing Address:

FEI Number: 20-0413634

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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: KASSLER, JOSEPH F
Address: 2000 RIVEREDGE PKWY - STE 100
City-St-Zip: ATLANTA, GA 30328

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: KASSLER, JOSEPH F
Address: 2000 RIVEREDGE PKWY - STE 100
City-St-Zip: ATLANTA, GA 30328

Title: MGRM () Change (X) Addition
Name: COLVIN, MICHAEL
Address: 2000 RIVEREDGE PKWY STE 100
City-St-Zip: ATLANTA, GA 30328

Title: MGRM () Change (X) Addition
Name: HYCHE, JOHN
Address: 2000 RIVEREDGE PKWY STE 100
City-St-Zip: ATLANTA, GA 30328

Title: MGRM () Change (X) Addition
Name: ELLER, BRAD
Address: 2000 RIVEREDGE PKWY STE 100
City-St-Zip: ATLANTA, GA 30328

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: DAVID G LAZA

CFO

04/03/2009

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