


**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Sep 11, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # L03000008116**

1. Entity Name  
 ROSE TREE PLACE, L.L.C.



Principal Place of Business 24405 HIPSLEY MILL ROAD GAITHERSBURG, MD 20882	Mailing Address 24405 HIPSLEY MILL ROAD GAITHERSBURG, MD 20882
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**DO NOT WRITE IN THIS SPACE**



07132006No Chg-LLC CR2E083 (11/05)

4. FEI Number 32-0057916	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

WILLIGER, BILL  
 14610 42ND ST N  
 TAMPA, FL 33613

**DO NOT WRITE IN THIS SPACE**

6. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing)

**Filing Fee is \$50.00**  
**Due by September 6, 2006**

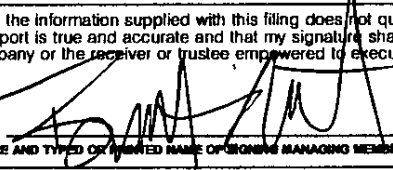
9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MARSICO, AL 24405 HIPSLEY MILL RD GAITHERSBURG, MD 20886
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 09/11/06-80005-013 50.00

**DO NOT WRITE IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  DATE: 9-06-06 8:39 AM Daytime Phone # \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF ORIGINAL MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE