2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000081412

1. Entity Name

ROGERS AMERICAN HOLDINGS, LLC



FILED Feb 16, 2006 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

1133 BAL HARBOR, SUITE 1139, #252 PUNTA GORDA, FL 33950 1133 BAL HARBOR, SUITE 1139, #252 PUNTA GORDA, FL 33950



01112006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-1859284 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145

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The above named entity submits this statement for the purpose of changing its registered office or registered the obligations of registered agent.			d agent, or both, in the State of Florida. I am lamillar with, and accept	
SIGNA	ATURE Signature, typed or printed name of registereo agent and little it applicable	[NOTE: Registered Agent signature required when reinstating]	GATE	
	Filing Fee is \$50.00 Due by May 1, 2008		U00000436104	
9.	MANAGING MEMBERS/MANAGERS		02/27/06-80024-009 S0.00	

9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET AUDRESS GITY-ST-ZIP	MGR ROGERS, J. ROY 1133 BAL HARBOR, SUITE 1139, #252 PUNTA GORDA, FL 33950	
TITLE NAME SIREEI ADDRESS CITY-ST-ZIP	S WROBLEWSKI, LISA 1133 BAL HARBOR, SUITE 1139, #252 PUNTA GORDA, FL 33950	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ROGERS, J. ROY 1133 BAL HARBOR. SUITE 1139, #252 PUNTA GORDA, FL 33950	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS		

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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.

CITY-ST-ZIP

J. R , ROGERS
OF PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1.1506

Caytime Phone 9