

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000122174

**FILED**  
**Jan 16, 2009**  
**Secretary of State**

**Entity Name:** ROSEMEAD PARTNERS, L.L.C.

**Current Principal Place of Business:**

815 E. 63RD PLACE  
INDIANAPOLIS, IN 46220

**New Principal Place of Business:**

**Current Mailing Address:**

330 S PINEAPPLE AVE  
106  
SARASOTA, FL 34236

**New Mailing Address:**

**FEI Number:** 20-4102430      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

KAUFFMAN, GARY ESQ.  
C/O DUNLAP & MORAN, P.A.  
1990 MAIN STREET, SUITE 700  
SARASOTA, FL 34236 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:** SCHERRER, PAUL A  
**Address:** 815 E. 63RD PLACE  
**City-St-Zip:** INDIANAPOLIS, IN 46220

**ADDITIONS/CHANGES:**

**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: PAUL A. SCHERRER      MGR      01/16/2009

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