

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000014416

FILED
Mar 02, 2009
Secretary of State

Entity Name: RIT LLC

Current Principal Place of Business:

23192 GRASSY PINE DR.
ESTERO, FL 33928

New Principal Place of Business:

Current Mailing Address:

23192 GRASSY PINE DR.
ESTERO, FL 33928

New Mailing Address:

FEI Number: 51-0589806

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VINCE, LINDA L
23192 GRASSY PINE DR.
ESTERO, FL 33928 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: MGRM () Delete
Name: SULTAN, SHAHID
Address: 15671 CHATFIELD DR.
City-St-Zip: FT. MYERS, FL 33908

Title: MGRM () Delete
Name: SULTAN, KELLI M
Address: 15671 CHATFIELD DR.
City-St-Zip: FT. MYERS, FL 33908

Title: MGRM () Delete
Name: VINCE, BRYAN C
Address: 5959 WINKLER RD #306
City-St-Zip: FT. MYERS, FL 33919

Title: MGRM () Delete
Name: VINCE, LINDA L
Address: 23192 GRASSY PINE DR.
City-St-Zip: ESTERO, FL 33928

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: LINDA L VINCE

MGRM

03/02/2009

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