

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000073418

FILED  
Apr 08, 2009  
Secretary of State

Entity Name: ROSE AVENUE PARTNERS, LLC

**Current Principal Place of Business:**

907 OUTER RD  
ORLANDO, FL 32814

**New Principal Place of Business:**

907 OUTER RD  
SUITE B  
ORLANDO, FL 32814

**Current Mailing Address:**

907 OUTER RD  
ORLANDO, FL 32814

**New Mailing Address:**

907 OUTER RD  
SUITE B  
ORLANDO, FL 32814

FEI Number: 20-5330253

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KHAN, NISHAD A  
907 OUTER RD  
ORLANDO, FL 32814 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: PRES ( ) Delete  
Name: MUZAFFAR, CHAUDHRY A  
Address: 907 OUTER RD  
City-St-Zip: ORLANDO, FL 32814

Title: VP ( ) Delete  
Name: MUBASHIR, CHAUDHRY A  
Address: 907 OUTER RD  
City-St-Zip: ORLANDO, FL 32814

Title: TRES ( ) Delete  
Name: MOHAMMED, CHAUDHRY A  
Address: 1013 MONTANA ST., SUITE B  
City-St-Zip: ORLANDO, FL 32803

Title: SECR ( ) Delete  
Name: MUGHIS, CHAUDHRY A  
Address: 907 OUTER RD  
City-St-Zip: ORLANDO, FL 32814

**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: MOHAMMED CHAUDHRY

TRES

04/08/2009

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