

2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M10000001108

Entity Name: RP-ORLANDO, LLC**Current Principal Place of Business:**550 SOUTH TRYON STREET
DEC/45A
CHARLOTTE, NC 28202**Current Mailing Address:**550 SOUTH TRYON STREET
DEC/45A
CHARLOTTE, NC 28202 US**FEI Number:** 27-4288389**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US*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

Authorized Person(s) Detail :

Title SOLE MEMBER
Name CLEAR SKIES SOLAR, LLC
Address 550 SOUTH TRYON STREET
City-State-Zip: CHARLOTTE NC 28202

Title ASST. SECRETARY
Name BEACH, RICHARD G
Address 550 SOUTH TRYON STREET
City-State-Zip: CHARLOTTE NC 28202

Title PRES
Name WOLF, GREGORY C
Address 550 SOUTH TRYON STREET
City-State-Zip: CHARLOTTE NC 28202

Title VP
Name MCNAY, THOMAS C
Address 139 EAST FOURTH STREET
City-State-Zip: CINCINNATI OH 45202

Title CFO AND CONTROLLER
Name SAVOY, BRIAN D.
Address 550 SOUTH TRYON STREET
City-State-Zip: CHARLOTTE NC 28202

Title TREA
Name DE MAY, STEPHEN G
Address 550 SOUTH TRYON STREET
City-State-Zip: CHARLOTTE NC 28202

Title ASST. SECRETARY
Name WRIGHT, NANCY M.
Address 550 SOUTH TRYON STREET DEC45A
City-State-Zip: CHARLOTTE NC 28202

Title ASSISTANT TREASURER
Name BUCKLER, W. BRYAN
Address 550 SOUTH TRYON STREET
City-State-Zip: CHARLOTTE NC 28202

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I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: NANCY M. WRIGHT**ASSISTANT SECRETARY 01/15/2014**

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title VP, TAX
Name BUTLER, KEITH G.
Address 550 SOUTH TRYON STREET
City-State-Zip: CHARLOTTE NC 28202

Title ASSISTANT SECRETARY
Name DWIGHT, GEORGE II
Address 139 EAST FOURTH STREET
City-State-Zip: CINCINNATI OH 45202

Title ASSISTANT SECRETARY
Name RINGEL, ROBERT J.
Address 139 EAST FOURTH STREET
City-State-Zip: CINCINNATI OH 45202

Title VP
Name WEHNER, JEFFREY W.
Address 550 SOUTH TRYON STREET
City-State-Zip: CHARLOTTE NC 28202

Title ASSISTANT TREASURER
Name DUFFY, KRIS C.
Address 550 SOUTH TRYON STREET
City-State-Zip: CHARLOTTE NC 28202

Title SECRETARY
Name MALTZ, DAVID S.
Address 550 SOUTH TRYON STREET
City-State-Zip: CHARLOTTE NC 28202

Title VP
Name STALLMAN, BRIAN K.
Address 139 EAST FOURTH STREET
City-State-Zip: CINCINNATI OH 45202