

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 15, 2008 08:00 AM
Secretary of State

DOCUMENT # L00000000815

1. Entity Name
RSD REAL ESTATE MANAGEMENT, LLC



Principal Place of Business

**9505 S.E. 134TH STREET
SUMMERFIELD, FL 34491
156 CAMELOT DR
HUNTINGTON, WV 2581**

Mailing Address

**PO BOX 1060
HUNTINGTON, WV 25713-1060**



02052008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3621903

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**HUMPHRIES, J. GREGORY ESQ.
300 SOUTH ORANGE AVENUE
SUITE 1000
ORLANDO, FL 32801-3373**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

**U00000829398
02/26/08-80039-009 138.75**

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
NAME POINDEXTER, CAROLYN J
STREET ADDRESS RT 1, BOX 279
CITY-ST-ZIP PRICHARD, WV 25555

TITLE MGR
NAME POINDEXTER, METTA E
STREET ADDRESS 126 ROTARY ROAD
CITY-ST-ZIP HUNTINGTON, WV 25705

TITLE MGR
NAME WILLIAMS, MARY P
STREET ADDRESS 156 CAMELOT DRIVE
CITY-ST-ZIP HUNTINGTON, WV 25701

TITLE MGR
NAME POINDEXTER, J.B. III
STREET ADDRESS 23804 ROLLING FORK WAY
CITY-ST-ZIP GAITHERSBURG, MD 20882

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE:

Mary P. Williams, member

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

2-16-08

Date

Daytime Phone #