

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000007910

FILED  
Mar 19, 2009  
Secretary of State

Entity Name: REMOTE CONTROL SOLUTIONS, LLC

## Current Principal Place of Business:

4862 E. BASELINE RD.  
SUITE 104  
MESA, AZ 85206

## New Principal Place of Business:

## Current Mailing Address:

4862 E. BASELINE RD.  
SUITE 104  
MESA, AZ 85206

## New Mailing Address:

FEI Number: 59-3729792      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FOLEY & LARDNER  
111 NORTH ORANGE AVE.  
SUITE 1800  
ORLANDO, FL 32802 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: SCANLAN, FRED T  
Address: 2237 E. BEACHCOMBER DR.  
City-St-Zip: GILBERT, AZ 85234 US

Title: MGR ( ) Delete  
Name: SCANLAN, BENJAMAN D  
Address: 2237 E. BEACHCOMBER DR.  
City-St-Zip: GILBERT, AZ 85234 US

Title: MGR ( ) Delete  
Name: SCANLAN, FRED E  
Address: 3931 E. BARBARITA AVE.  
City-St-Zip: GILBERT, AZ 85234

Title: MGR ( ) Delete  
Name: ROUBICEK, JOSEPH  
Address: 5060 SUGAR PIKE RD. #105  
City-St-Zip: CANTON, GA 30115

## 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: BEN SCANLAN

MGR

03/19/2009

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