2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

## Mar 01, 2006 8:00 am Secretary of State **DOCUMENT # L01000008676** 02-10-2006 90166 022 \*\*\*\*50.00 RICE LEASING, LLC Mailing Address Principal Place of Business 7256 ANGEL FALLS COURT BOYNTON BEACH FL 33437 7256 ANGEL FALLS COURT BOYNTON BEACH FL 33437 2. Principal Place of Business 730 5 Kowlett Mailing Address SAME Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E083 (10/05) City & State City & State Applied For 4. FEI Number 54-3644829 TAM PA Not Applicable Country \$5.00 Additional 5. Certificate of Status Desired HILL'S BURNUGH Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent OLEKSY, ERIC Street Address (P.O. Box Number is Not Acceptable) 1821 TINKER DR **LUTZ FL 33549** City Zip Code 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 [NOTE, Registered Agen) signature required when reinstiting DATE FILE NOW!!! FEE IS \$50.00 " Make Check Payable to Florida Department of State Due By May 1, 2006 MANAGING MEMBERS/MANAGERS 9. 10. ADDITIONS/CHANGES tifle DRE ☐ Change Addition NAME NAME STREET ADDRE STREET ACCRESS CITY-ST-ZIP CITY-ST-ZIP ANAGINO MEMBER RILE nne Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-SI-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change □ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-S1-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes. -31-06

IG MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE



## FLORIDA DEPARTMENT OF STATE Division of Corporations

February 14, 2006

RICE LEASING, LLC 7256 ANGEL FALLS COURT BOYNTON BEACH, FL 33437

Subject: RICE LEASING, LLC

Reference Number:

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

**L01000008676** 

Provide the title(s) of each manager, managing member or principal listed on the report or on an attachment.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/cj ANNUAL REPORTS SECTION