

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000000352

**FILED**  
**Apr 19, 2011**  
**Secretary of State**

**Entity Name:** R.R. SIMMONS DESIGN AND CONSTRUCTION, LLC

**Current Principal Place of Business:**

13112 TELECOM DRIVE  
TAMPA, FL 33637

**New Principal Place of Business:**

**Current Mailing Address:**

13112 TELECOM DRIVE  
TAMPA, FL 33637

**New Mailing Address:**

**FEI Number:** 26-0016179

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

RRS 3 INC.  
13112 TELECOM DRIVE  
TAMPA, FL 33637 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  
**Name:** SIMMONS, LINDA O  
**Address:** 13112 TELECOM DRIVE  
**City-St-Zip:** TAMPA, FL 33637

**Title:** VST  
**Name:** WEBSTER, MALINDA M  
**Address:** 10814 ROCKLEDGE VIEW DRIVE  
**City-St-Zip:** RIVERVIEW, FL 33579

**Title:** V  
**Name:** ZEVALLOS, CESAR A  
**Address:** 9113 WOODBRIDGE RUN DR  
**City-St-Zip:** TAMPA, FL 33647

**Title:** MGR  
**Name:** RRS 3 INC.  
**Address:** 13112 TELECOM DRIVE  
**City-St-Zip:** TAMPA, FL 33637

**Title:** V  
**Name:** KITCHINER, BRENT E  
**Address:** 901 GOLF ISLAND DRIVE  
**City-St-Zip:** APOLLO BEACH, FL 33572

I hereby 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:** RRS 3 INC, BY LINDA O. SIMMONS, ITS PRES

MGR

04/19/2011

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