

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000006855

Entity Name: RONO, LLC

FILED
Jan 12, 2009
Secretary of State

Current Principal Place of Business:

5401 SOUTH KIRKLAND RD, STE 650
ORLANDO, FL 32819

New Principal Place of Business:

Current Mailing Address:

5401 SOUTH KIRKLAND RD, STE 650
ORLANDO, FL 32819

New Mailing Address:

FEI Number: 51-0468927

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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: KURZ, PIERRE
Address: C/O 21, RUE DR MT BLANC
City-St-Zip: GENEVA, SWITZERLAND,

Title: MGR () Delete
Name: WEBER, JEAN-PIERRE
Address: BELCHENSTR 19
City-St-Zip: BASLE SW,

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: TD (X) Change () Addition
Name: KURZ, PIERRE
Address: 35 CH DE LA SEYMAZ, CH- 1253 VANDOEUVRES
City-St-Zip: SWITZERLAND, FC

Title: D (X) Change () Addition
Name: WEBER, JEAN-PIERRE
Address: CHALET TILL, CH 1653 CRESUZ
City-St-Zip: SIWTZERLAND, FC

Title: PD () Change (X) Addition
Name: ROSS, THOMAS T
Address: SUITE 1200, 420 S ORANGE AVE
City-St-Zip: ORLANDO, FL 32801

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: PIERRE KURZ

TD

01/12/2009

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