

**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Apr 12, 2006  
Secretary of State**

DOCUMENT# L02000013022

Entity Name: R & D INVESTORS, LLC

**Current Principal Place of Business:**

3195 N POWERLINE RD  
STE 100  
POMPANO BEACH, FL 33069

**New Principal Place of Business:**

**Current Mailing Address:**

3195 N POWERLINE RD  
STE 100  
POMPANO BEACH, FL 33069

**New Mailing Address:**

FEI Number: 01-0711875      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

SHAHADY, THOMAS R ESQ  
350 EAST LAS OLAS BLVD.  
SUITE 1700  
FORT LAUDERDALE, FL 33301 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: MGRM ( ) Delete  
Name: ROEPNACK, ROBERT A  
Address: 3195 N POWERLINE RD STE 100  
City-St-Zip: POMPANO BEACH, FL 33069

Title: MGRM ( ) Delete  
Name: ROEPNACK, DAVID H  
Address: 3195 POWERLINE RD STE 100  
City-St-Zip: POMPANO BEACH, FL 33069

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: ROEPNACK, ROBERT A  
Address: 23 ELK MOUNTAIN SCENIC HIGHWAY  
City-St-Zip: ASHEVILLE, NC 28804

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT A ROEPNACK

MGRM

04/12/2006

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