2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DOCUMENT # L02000017918

t. Entity Name REZOLIN, LLC



FILED Mar 13, 2006 08:00 AM **Secretary of State**

Principal Place of Business

131-A BUSINESS CENTER DRIVE UNIT #7

ORMOND BEACH, FL 32174 US

Mailing Address

131-A BUSINESS CENTER DRIVE UNIT #7

ORMOND BEACH, FL 32174

CR2E083 (11/05)

4. FEI Number 03-0474206

02252006 No Chg-LLC

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

DELLINGER, TRISHA L 1265 W. GRANADA BOULEVARD STE. 1 ORMOND BEACH, FL 32174

DO NOT WRITE IN THIS SPACE

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.	

SIGNATURE.

Signature, typed or printed name of registered egent and title if explicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00 Due by May 1, 2006

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9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DELLINGER, CARL A 131-A BUSINESS CENTER DRIVE ORMOND BEACH, FL 32174
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CHY-ST-ZIP	
TITLE NAME STREET ADDRESS CHY-ST-ZIP	
TITLE NAME STREET ACCRESS CITY-ST-ZIP	

HUBUUHB66**6**56 03/23/06-90019-010 50.00

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 or the regeiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

2-28-06

386-677-8238