## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L02000026446

Entity Name: RR SERVICES, L.L.C.

FILED Jan 30, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1090 NW 87ND AVE 12403 NACOGDOCHES MIAMI, FL 33126

110

SAN ANTONIO, TX 78217

**Current Mailing Address: New Mailing Address:** 

515 EAST PARK AVENUE TALLAHASSEE, FL 32301

FEI Number: 20-0268488 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

CORPDIRECT AGENTS, INC. 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 US

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:

ADDITIONS/CHANGES:

MGR Title: () Delete (X) Change ( ) Addition CARTAYA, PATRICIA INTERVAL FINANCIAL S, ERVICES L.C. Name: Name: Address: 1890 NW 82ND AVE Address: 12403 NACOGDOCHES SUITE 110

City-St-Zip: MIAMI, FL 33126 City-St-Zip: SAN ANTONIO, TX 78217

(X) Change ( ) Addition Title: MGR ( ) Delete Title:

Name: WRIGHT, DAVID Name: CARPENTER, NORMAN A

Address: 3363 W COMMERCE BLVD. # 202 Address: 12403 NACOGDOCHES SUITE 110 City-St-Zip: FORT LAUDERDALE, FL 33309 City-St-Zip: SAN ANTONIO, TX 78217

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: NORMAN A. CARPENTER 01/30/2006