2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 16, 2009
Secretary of State

DOCUMENT# L02000034217

Entity Name: RICO SERVICES, LLC

Current Principal Place of Business:

829 WATERWAY PLACE
LONGWOOD, FL 32750 US

New Principal Place of Business:

Current Mailing Address:

829 WATERWAY PLACE
LONGWOOD, FL 32750 US

New Mailing Address:

FEI Number: 65-1190997 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PRATT, JAMES R ESQ.
369 N. NEW YORK AVE. 3RD FLOOR
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

PRATT, JAMES R ESQ.
829 WATERWAY PLACE
LONGWOOD, FL 32750 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: _____ 01/16/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: SHORE, ANDREW J
Address: 1648 MAGNOLIA AVENUE
City-St-Zip: WINTER PARK, FL 32789 US

Title: MGRM ( ) Delete
Name: SHORE, DEBORAH J
Address: 1648 MAGNOLIA AVENUE
City-St-Zip: WINTER PARK, FL 32789 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: SHORE, ANDREW J
Address: 1648 MAGNOLIA AVENUE
City-St-Zip: WINTER PARK, FL 32750 US

Title: MGRM (X) Change ( ) Addition
Name: SHORE, DEBORAH J
Address: 1648 MAGNOLIA AVENUE
City-St-Zip: WINTER PARK, FL 32750 US

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: ANDREW SHORE MGR 01/16/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date