

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000004922

Entity Name: RS - CPC, LLC

FILED  
Jan 13, 2008  
Secretary of State

**Current Principal Place of Business:**

8200 NW 15TH PLACE  
GAINESVILLE, FL 32606

**New Principal Place of Business:**

**Current Mailing Address:**

8200 NW 15TH PLACE  
GAINESVILLE, FL 32606

**New Mailing Address:**

FEI Number: 27-0046742

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

BUTTS, ROBERT P  
FISHER & BUTTS, P.A.  
5200 SW 91ST TERRACE, SUITE 101  
GAINESVILLE, FL 32608 US

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

WEINGART, BRECK A  
8200 NW 15TH PLACE  
GAINESVILLE, FL 32606 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: BRECK A. WEINGART

01/13/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: GREER, JACK  
Address: 5800 NW 39TH AVE., SUITE 101  
City-St-Zip: GAINESVILLE, FL 32606

Title: MGR ( ) Delete  
Name: WEINGART, BRECK  
Address: 8200 NW 15TH PLACE  
City-St-Zip: GAINESVILLE, FL 32606

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: ROBINSON, THOMAS  
Address: 5800 NW 39TH AVE., SUITE 101  
City-St-Zip: GAINESVILLE, FL 32606

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

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: BRECK A. WEINGART

MR.

01/13/2008

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