

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 11, 2008 8:00 am
Secretary of State

01-11-2008 90079 020 ***138.75

DOCUMENT # L03000021111



1. Entity Name

RUE POINT INVESTMENT, LLC

Principal Place of Business

20 HILL RD
STEPHEN L COGGINS AKA STEVE & CATHY OBRIEN
ATLANTIC HIGHLANDS, NJ 07716 US

Mailing Address

20 HILL RD
STEPHEN L COGGINS AKA STEVE & CATHY OBRIEN
ATLANTIC HIGHLANDS, NJ 07716 US

2. Principal Place of Business - No P.O. Box #

250 E. 63rd Street

3. Mailing Address

250 E. 63rd Street

Suite, Apt. #, etc.

#303

Suite, Apt. #, etc.

#303

City & State

NY, NY

City & State

NY, NY

Zip

10065

Country

USA

Zip

10065

Country

USA

01072008 Chg-LLC CR2E083 (12/06)

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

URNES, JENNIFER
325 VANDERBILT BEACH RD
PREMIER PROPERTIES OF SW FLORIDA
NAPLES, FL 34108

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

Make check payable to
Florida Department of State

9. MANAGING MEMBERS / MANAGERS

TITLE MGRM ☐ Delete
NAME COGGINS, STEPHEN L
STREET ADDRESS 20 HILL RD
CITY-ST-ZIP ATLANTIC HIGHLANDS, NJ 07716

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS / CHANGES

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 250 E. 63rd Street, #303
CITY-ST-ZIP NY, NY 10065

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Stephen L. Coggins 9/1/11 *Steve O'Brien*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

212 832 7877