

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000035946

FILED
May 01, 2010
Secretary of State

Entity Name: RESIDENCE REVIVAL, L.L.C.

Current Principal Place of Business:

937 FLEMING STREET
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

6178 AUTUMN POINT
OLIVE BRANCH, MS 38654

New Mailing Address:

FEI Number: 61-1457538 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

WILLIAMS, CHRISTINE M
937 FLEMING STREET
KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

WILLIAMS, RICKEY R
937 FLEMING STREET
KEY WEST, FL 33040 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: RICKEY R. WILLIAMS

05/01/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: WILLIAMS, RICKEY R
Address: 6178 AUTUMN POINT
City-St-Zip: OLIVE BRANCH, MS 38654

Title: MGRM
Name: WILLIAMS, CHRISTINE M
Address: 6178 AUTUMN POINT
City-St-Zip: OLIVE BRANCH, MS 38654

Title: MGRM
Name: JOHNSON, MARK
Address: 5791 230TH STREET EAST
City-St-Zip: ELKO, MN 55020

Title: MGRM
Name: JOHNSON, ANN
Address: 5791 230TH STREET EAST
City-St-Zip: ELKO, MN 55020

I hereby 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: RICKEY R. WILLIAMS

MGRM

05/01/2010

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