

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000039054

FILED
Jul 10, 2006
Secretary of State

Entity Name: R E SOLUTIONS TEAM LLC

Current Principal Place of Business:

P.O.BOX 351692
JACKSONVILLE, FL 32235

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 351692
JACKSONVILLE, FL 32235

New Mailing Address:

FEI Number: 52-2412694 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:

Name and Address of New Registered Agent:

GERALD WALKER
P.O.BOX 351692
JACKSONVILLE, FL 32235 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:

Title: MGR () Delete
Name: WALKER, GERALD MGR
Address: P.O.BOX 351692
City-St-Zip: JACKSONVILLE, FL 32235 US

Title: MGR () Delete
Name: WALKER, DENISE M MGR
Address: P.O.BOX 351692
City-St-Zip: JACKSONVILLE, FL 32235 US

ADDITIONS/CHANGES:

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: GERALD WALKER

MGR

07/10/2006

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