


# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 24, 2007 8:00 am**  
**Secretary of State**

04-24-2007 90110 014 \*\*\*\*50.00

<b>DOCUMENT # L03000041979</b> 1. Entity Name RCMW, LLC	
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Principal Place of Business 980 NORTH FEDERAL HIGHWAY SUITE 200 BOCA RATON, FL 33432	Mailing Address 980 NORTH FEDERAL HIGHWAY SUITE 200 BOCA RATON, FL 33432
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip	3. Mailing Address Suite, Apt. #, etc. City & State Zip
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04122007 Chg-LLC CR2E083 (12/06)

4. FEI Number 20-0363469	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent SKATOFF, JEFFREY H 980 NORTH FEDERAL HIGHWAY SUITE 200 BOCA RATON, FL 33432	7. Name and Address of New Registered Agent Name <u>CARL KLEPPER</u> Street Address (P.O. Box Number is Not Acceptable) <u>980 N. Federal Highway # 200</u> City <u>Boca Raton</u> FL <u>33432</u>
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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 *Carl Klepper* (NOTE: Registered Agent signature required when reinstating) DATE 4-17-07

**Filing Fee is \$50.00  
Due by May 1, 2007**

**Make check payable to  
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM COMPARATO, JAMES 980 NORTH FEDERAL HIGHWAY, SUITE 200 BOCA RATON, FL 33432 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Additi
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KLEPPER, CARL E JR. 980 NORTH FEDERAL HIGHWAY, SUITE 200 BOCA RATON, FL 33432 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Additi
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM <u>D'Angelo</u> DANCELO, ROBERT 980 N FEDERAL HWY SUITE 200 BOCA RATON, FL 33432 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>D'Angelo, Robert J.</u> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Additi
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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: *Carl Klepper* 4-17-07