


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 18, 2008 08:00 AM
Secretary of State

| | |
|---|---|
| DOCUMENT # L03000046097 1. Entity Name RRM, LLC |  |
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|---|---|
| Principal Place of Business 444 SOUTH HULL STREET MONTGOMERY, AL 36104 US | Mailing Address 444 SOUTH HULL STREET MONTGOMERY, AL 36104 US |
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01162008No Chg-LLC CR2E083 (12/07)

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|---|---------------------------------------|
| 4. FEI Number 56-2416763 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

6. Name and Address of Current Registered Agent

MCGILL, ROBERT E III
 36008 EMERALD COAST PARKWAY
 SUITE 301
 DESTIN, FL 32541

DO NOT WRITE IN THIS SPACE

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

9. MANAGING MEMBERS/MANAGERS

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|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM MARTIN, RITA C 444 SOUTH HULL STREET MONTGOMERY, AL 36104 |
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 01/22/08-80012-020 138.75

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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: *Rita C. Martin* RITA C. MARTIN 1/16/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #