2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 13, 2009
Secretary of State

DOCUMENT# L03000056691

Entity Name: THE ROUNDTABLE FUNDS, LLC

Current Principal Place of Business:

911 HICKORY FORK DRIVE
SEFFNER, FL 33584 US

New Principal Place of Business:

Current Mailing Address:

911 HICKORY FORK DRIVE
SEFFNER, FL 33584 US

New Mailing Address:

FEI Number: 20-0551647 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIFORD, LYNDA K
911 HICKORY FORK DRIVE
SEFFNER, FL 33584 US

Name and Address of New Registered Agent:

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:	MGRM	( ) Delete
Name:	ELSBERRY, DONALD L	
Address:	922 BUNKERVIEW DRIVE	
City-St-Zip:	APOLLO BEACH, FL 33572 US	
Title:	MGRM	( ) Delete
Name:	WILLIFORD, LYNDA K	
Address:	911 HICKORY FORK DRIVE	
City-St-Zip:	SEFFNER, FL 33584 US	
Title:	MGRM	( ) Delete
Name:	GULLICK, CHARIS R	
Address:	4722 OAK RUN DRIVE	
City-St-Zip:	SARASOTA, FL 34243 US	
Title:	MGRM	( ) Delete
Name:	ELSBERRY, LORI D	
Address:	P.O. BOX 3497	
City-St-Zip:	APOLLO BEACH, FL 33572 US	
Title:	MGRM	( ) Delete
Name:	ELSBERRY, LAWRENCE G	
Address:	121 24ST AVENUE SW	
City-St-Zip:	RUSKIN, FL 33570 US	

ADDITIONS/CHANGES:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	MGRM	(X) Change ( ) Addition
Name:	ELSBERRY, LORI D	
Address:	P.O. BOX 1386	
City-St-Zip:	BRANDON, FL 33509 US	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify 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: LYNDA K WILLIFORD S/TR 03/13/2009

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