

**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Mar 24, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # L04000006115**  
 1. Entity Name  
**REDDEN BUSINESS SERVICES, LLC**



Principal Place of Business <b>4622 SW 7TH AVE.          CAPE CORAL, FL 33914</b>	Mailing Address <b>4622 SW 7TH AVE.          CAPE CORAL, FL 33914</b>
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**DO NOT WRITE IN THIS SPACE**



01162008 No Chg-LLC CR2E083 (12/07)

4. FEI Number <b>59-1975667</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
**REDDEN, JOSEPH M  
 4622 SW 7TH AVE.  
 CAPE CORAL, FL 33914**

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing)

**FILE NOW!!! FEE IS \$138.75  
 After May 1, 2008 Fee will be \$538.75**

U00000866852  
 04/08/08-80045-023 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR REDDEN, JOSEPH M 4622 SW 7TH AVE. CAPE CORAL, FL 33914</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

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: *Joseph M Redden*

3-28-08 9946148

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

*Joseph M Redden*