

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000030169

Entity Name: RE FINANCIAL, LLC

FILED  
Apr 14, 2009  
Secretary of State

**Current Principal Place of Business:**

3525 PALAIS TERRACE  
WELLINGTON, FL 33467

**New Principal Place of Business:**

3525 PALAIS TERRACE  
WELLINGTON, FL 33449

**Current Mailing Address:**

3525 PALAIS TERRACE  
WELLINGTON, FL 33467

**New Mailing Address:**

3525 PALAIS TERRACE  
WELLINGTON, FL 33449

FEI Number: 20-1203504

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GERSON, GARY N  
1645 PALM BEACH LAKES BLVD., SUITE 1200  
WEST PALM BEACH, FL 33401 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: RABINOWITZ, EVAN  
Address: 3525 PALAIS TERRACE  
City-St-Zip: WELLINGTON, FL 33467

Title: M ( ) Delete  
Name: EVASIOUS, JOHN  
Address: 3525 PALAIS TERRACE  
City-St-Zip: WELLINGTON, FL 33467

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: RABINOWITZ, EVAN  
Address: 3525 PALAIS TERRACE  
City-St-Zip: WELLINGTON, FL 33467

Title: MGR (X) Change ( ) Addition  
Name: EVASIOUS, JOHN  
Address: 3525 PALAIS TERRACE  
City-St-Zip: WELLINGTON, FL 33467

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: EVAN RABINOWITZ

MGR

04/14/2009

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