2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000055689

Entity Name: RASI, LLC

FILED Aug 25, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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438 SAVOIE DRIVE

PALM BEACH GARDENS, FL 33410

Current Mailing Address: New Mailing Address:

438 SAVOIE DRIVE

PALM BEACH GARDENS, FL 33410

FEI Number: 20-1417294 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

O'BRIEN, DERMONT O'BRIEN, DERMOT 438 SAVOIE DRIVE 438 SAVOIE DRIVE

PALM BEACH GARDENS, FL 33410 US PALM BEACH GARDENS, FL 33410 US

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: DERMOT OBRIEN 08/25/2005

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: () Delete Title: MNGR () Change (X) Addition

Name: Name: OBRIEN, DERMOT Address: Address: 438 SAVOIE DRIVE

City-St-Zip: City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: () Delete Title: MNGR () Change (X) Addition

Name:Name:OBRIEN, GEORGIAAddress:Address:438 SAVOIE DRIVE

City-St-Zip: City-St-Zip: PALM BEACH GARDENS, FL 33410

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DERMOT OBRIEN MNGR 08/25/2005