

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000071345

Entity Name: SOLID RESOURCES, LLC

FILED  
Apr 24, 2009  
Secretary of State

## Current Principal Place of Business:

2201 CANTU COURT, SUITE 119  
SARASOTA, FL 34232

## New Principal Place of Business:

555 WINDERLEY PLACE  
SUITE 220  
MAITLAND, FL 32751

## Current Mailing Address:

2201 CANTU COURT, SUITE 119  
SARASOTA, FL 34232

## New Mailing Address:

555 WINDERLEY PLACE  
SUITE 220  
MAITLAND, FL 32751

FEI Number: 20-1728339

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FLORIDA FILING & SEARCH SERVICES, INC.  
155 OFFICE PLAZA DR., SUITE A  
TALLAHASSEE, FL 32301 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: MGR ( ) Delete  
Name: PERKINS, K. TIM  
Address: 2929 E. IMPERIAL HWY., SUITE 290  
City-St-Zip: BREA, CA 92821

Title: P ( ) Delete  
Name: STANKOVICH, GARY J  
Address: 2929 E. IMPERIAL HWY., SUITE 290  
City-St-Zip: BREA, CA 92821

Title: CFO ( ) Delete  
Name: FORSTER, KEITH R  
Address: 2929 E. IMPERIAL HWY., SUITE 290  
City-St-Zip: BREA, CA 92821

Title: MGR ( ) Delete  
Name: BLANK, RANDALL  
Address: 3500 SUNRISE HWY., SUITE T-103  
City-St-Zip: GREAT RIVER, NY 11739

Title: MGR ( ) Delete  
Name: GRAN, ALICE N  
Address: 2200 ELLER DRIVE  
City-St-Zip: FT. LAUDERDALE, FL 33316

Title: VP ( ) Delete  
Name: FABRIKANT, CHARLES  
Address: 2200 ELLER DRIVE  
City-St-Zip: FT. LAUDERDALE, FL 33316

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P (X) Change ( ) Addition  
Name: STANKOVICH, GARY J  
Address: 555 WINDERLEY PLACE, SUITE 220  
City-St-Zip: MAITLAND, FL 32751

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: ( ) 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: KEITH R. FORSTER

CFO

04/24/2009

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