2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000002360

1. Entity Name RCR ROOFING, L.L.C.



FILED Apr 12, 2007 08:00 A Secretary of State

Principal Place of Business

1682 W. HIBISCUS BLVD. MELBOURNE, FL 32901 Mailing Address

1682 W. HIBISCUS BLVD. MELBOURNE, FL 32901



03292007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-2132116 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CHASIN, ROBERT C 558 S. SONORA CIRCLE INDIALANTIC, FL, FL 32903

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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		t	
	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE
Filling Fee is \$50.00 Due by May 1, 2007			
9.	MANAGING MEMBERS/MANAGERS	With the second	
TITLE	MGRM		• •
NAME	CHASIN, ROBERT C		•
STREET ADDRESS	558 S. SONORA CIRCLE		U300000000
CITY-ST-ZIP	INDIALANTIC, FL 32903		U00000702427 04/20/07-80038-005 50.00
TITLE	MGRM		04/20/0/17600367003 30.00
NAME	LAWSON, TERRY R		
STREET ADDRESS	553 BEAUREGARD AVENUE	l l	
CITY-ST-ZIP	PALM BAY, FL 32907	`	

TITLE
NAME
STREET ADDRESS
CITY-SI-ZIP

NAME STREET ADDRESS

CITY-ST-ZIP TITLE

NAME STREET ADDRESS CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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11. I hereby certify that the information supplied with this filling does not qualify for the examplifons 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 eath; that 1 am a managing member or manager of the limited hability company or the receiver or trustee empowered to execute this report at required by Chapter 608, Florida Statutes.

SIGNATURE: Robert C. Chasin

3-29-07

u-403-857:

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

Date

Daytime Phone #