

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

07 SEP 18 AM 11:55

SECRETARY OF STATE
TALLAHASSEE FLORIDA



05312007No Chg-LLC CR2E083 (11/05)

DOCUMENT # L05000008068 1. Entity Name ROCKET SERVICES, LLC	
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Principal Place of Business 1000 LUCERNE TERRACE ORLANDO, FL 32806	Mailing Address 1000 LUCERNE TERRACE ORLANDO, FL 32806
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DO NOT WRITE IN THIS SPACE

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

8. Name and Address of Current Registered Agent

PRATT, JAMES R ESQ.
369 N. NEW YORK AVE. 3RD FLOOR
WINTER PARK, FL 32789

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 reinstating)

**Filing Fee is \$50.00
Due by September 14, 2007**

700109527067
09/19/07--01005--026 **50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CROWGEY, JASON 1000 LUCERNE TERRACE ORLANDO, FL 32806
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: _____ Date _____ Daytime Phone # _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE