

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000035537

Entity Name: R & S LLC

FILED  
Mar 31, 2008  
Secretary of State

## Current Principal Place of Business:

5908 ALTEC ROAD  
ORLANDO, FL 32808

## New Principal Place of Business:

403 HERMITAGE DR.  
ORLANDO, FL 32701

## Current Mailing Address:

P.O. BOX 941152  
MAITLAND, FL 32794 US

## New Mailing Address:

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

## Name and Address of Current Registered Agent:

RIVENBARK, RICHARD M  
5908 ALTEC ROAD  
ORLANDO, FL 32808 US

## Name and Address of New Registered Agent:

RIVENBARK, RICHARD M  
403 HERMITAGE DR  
ORLANDO, FL 32701 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:

03/31/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: RIVENBARK, RICHARD M  
Address: 5908 ALTEC ROAD  
City-St-Zip: ORLANDO, FL 32808

Title: MGRM ( ) Delete  
Name: RIVENBARK, SHARON M  
Address: 5908 ALTEC ROAD  
City-St-Zip: ORLANDO, FL 32808

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: RIVENBARK, RICHARD M  
Address: P.O. BOX 941152  
City-St-Zip: MAITLAND, FL 32794

Title: MGRM (X) Change ( ) Addition  
Name: RIVENBARK, SHARON M  
Address: P.O. BOX 941152  
City-St-Zip: MAITLAND, FL 32714

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: SHARON RIVENBARK

MS

03/31/2008

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