

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000050804

FILED
Apr 26, 2006
Secretary of State

Entity Name: RUSTIC PLANET INVESTMENTS, LLC

Current Principal Place of Business:

7805 BAYMEADOWS CIRCLE WEST
JACKSONVILLE, FL 32256

New Principal Place of Business:

2853 LORIMER TERRACE
JACKSONVILLE, FL 32207 US

Current Mailing Address:

7805 BAYMEADOWS CIRCLE WEST
JACKSONVILLE, FL 32256

New Mailing Address:

2853 LORIMER TERRACE
JACKSONVILLE, FL 32207 US

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

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD., SUITE 101
TALLAHASSEE, FL 323012960 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: MGRM () Delete
Name: ARAB, GABRIEL
Address: 7805 BAYMEADOWS CIRCLE WEST
City-St-Zip: JACKSONVILLE, FL 32256

Title: () Delete
Name:
Address:
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City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: V (X) Change () Addition
Name: ARAB, GABRIEL
Address: 2853 LORIMER TERRACE
City-St-Zip: JACKSONVILLE, FL 32207

Title: T () Change (X) Addition
Name: ARAB, GABRIEL
Address: 2853 LORIMER TERRACE
City-St-Zip: JACKSONVILLE, FL 32207

Title: D () Change (X) Addition
Name: ARAB, GABRIEL
Address: 2853 LORIMER TERRACE
City-St-Zip: JACKSONVILLE, FL 32207

Title: P () Change (X) Addition
Name: KOHL, KARYN
Address: 2853 LORIMER TERRACE
City-St-Zip: JACKSONVILLE, FL 32207

Title: S () Change (X) Addition
Name: KOHL, KARYN
Address: 2853 LORIMER TERRACE
City-St-Zip: JACKSONVILLE, FL 32207

Title: D () Change (X) Addition
Name: KOHL, KARYN
Address: 2853 LORIMER TERRACE
City-St-Zip: JACKSONVILLE, FL 32207

I hereby certify that the information supplied with this filing does not qualify for the 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: KARYN L. KOHL

MGRM

04/26/2006

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