


**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 29, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L05000051340</b> 1. Entity Name <b>ROSSELLE PARTNERS, L.L.C.</b>	
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Principal Place of Business <b>1923 SOUTHAMPTON ROAD JACKSONVILLE, FL 32207-8777</b>	Mailing Address <b>1923 SOUTHAMPTON ROAD JACKSONVILLE, FL 32207-8777</b>
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**DO NOT WRITE IN THIS SPACE**



01252007 No Chg-LLC CR2E083 (11/05)

4. FEI Number <b>20-2874522</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

**KENNEY, THERESA MARIE ESQ.  
C/O FORD, JETER, BOWLUS, DUSS, MORGAN  
10110 SAN JOSE BLVD.  
JACKSONVILLE, FL 32257**

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2007**

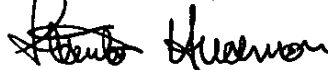
U000000607970  
01/31/07-80060-002 50.00

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM EASTON, WILLIAM M 1923 SOUTHAMPTON ROAD JACKSONVILLE, FL 322078777</b>
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**DO NOT WRITE  
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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:**  **1-26-07**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #