

**2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L05000078249

**FILED**  
**Oct 27, 2006**  
**Secretary of State****Entity Name:** RSZ, LLC**Current Principal Place of Business:**3519 PALM HARBOR BLVD  
PALM HARBOR, FL 34683**New Principal Place of Business:****Current Mailing Address:**3519 PALM HARBOR BLVD  
PALM HARBOR, FL 34683**New Mailing Address:****FEI Number:** 20-3281168**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE, SUITE 4  
WESTON, FL 33331 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: MR ( ) Delete  
Name: LUCAS, SCOTT A  
Address: 934 SKYE LANE  
City-St-Zip: PALM HARBOR, FL 34683

Title: MR (X) Delete  
Name: DARST, CHARLES R  
Address: 734 WEEDON DRIVE NE  
City-St-Zip: ST PETERSBURG, FL 33702

Title: MR (X) Delete  
Name: RUELAS, LUIS  
Address: 233 W ROUTE 59  
City-St-Zip: NANUET, NY 10954

Title: MR (X) Delete  
Name: GOODMAN, MATTHEW  
Address: 233 W ROUTE 59  
City-St-Zip: NANUET, NY 10954

Title: MR (X) Delete  
Name: MARINUCCI, JOSEPH  
Address: 233 W ROUTE 59  
City-St-Zip: NANUET, NY 10954

**ADDITIONS/CHANGES:**

Title: MR (X) Change ( ) Addition  
Name: DARST, CHARLES R  
Address: 734 WEEDON DR NE  
City-St-Zip: ST PETERSBURG, FL 33702

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: CHARLES R DARST

MR

10/27/2006

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