

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000085248

Entity Name: RN ENTERPRISES, LLC

FILED  
Apr 29, 2008  
Secretary of State

## Current Principal Place of Business:

12439 BRADY PLACE BLVD  
JACKSONVILLE, FL 32223 US

## New Principal Place of Business:

479-B PARKRIDGE AVENUE  
ORANGE PARK, FL 32065 US

## Current Mailing Address:

12439 BRADY PLACE BLVD  
JACKSONVILLE, FL 32223 US

## New Mailing Address:

479-B PARKRIDGE AVENUE  
ORANGE PARK, FL 32065 US

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CLEMENTS, RODNEYG B MGRM  
12439 BRADY PLACE BLVD  
SUITE 3102  
JACKSONVILLE, FL 32223 US

## Name and Address of New Registered Agent:

CLEMENTS, RODNEYG B MGRM  
479-B PARKRIDGE AVENUE  
ORANGE PARK, FL 32065 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: RODNEY G.B. CLEMENTS

04/29/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: CLEMENTS, RODNEYG B MGRM  
Address: 12439 BRADY PLACE BLVD  
City-St-Zip: JACKSONVILLE, FL 32223 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: CLEMENTS, RODNEYG B MGRM  
Address: 479-B PARKRIDGE AVENUE  
City-St-Zip: ORANGE PARK, FL 32065 US

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: RODNEY G.B. CLEMENTS

PRES

04/29/2008

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