

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000104625

Entity Name: RCTD, LLC

FILED  
Apr 18, 2007  
Secretary of State

**Current Principal Place of Business:**

10240 S.W. 133 CT  
MIAMI, FL 33186

**New Principal Place of Business:**

**Current Mailing Address:**

C/O MAHONEY COHEN AND COMPANY  
1200 BRICKELL AVE., SUITE 700  
MIAMI, FL 33131

**New Mailing Address:**

FEI Number: 20-3817606

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

JOHNSON, ROBERT B CPA  
10240 S.W. 133 CT  
MIAMI, FL 33186 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: MGR ( ) Delete  
Name: JOHNSON, ROBIN H  
Address: 10240 S.W. 133 CT  
City-St-Zip: MIAMI, FL 33186

Title: MGR ( ) Delete  
Name: JOHNSON, CARMEN M  
Address: 10240 S.W. 133 CT  
City-St-Zip: MIAMI, FL 33186

Title: MGR ( ) Delete  
Name: BERND-COHEN, TINA  
Address: 729 POWER STREET  
City-St-Zip: HELENA, MT 59601

Title: MGR ( ) Delete  
Name: SMITH, DAVID N  
Address: 729 POWER STREET  
City-St-Zip: HELENA, MT 59601

**ADDITIONS/CHANGES:**

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: ROBIN JOHNSON

MGR

04/18/2007

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