


**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jul 12, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L05000116659</b> 1. Entity Name <b>THE ROLLESTON COMPANY LLC</b>	
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Principal Place of Business <b>5120 W. 158TH STREET OVERLAND PARK, KS 66224 US</b>	Mailing Address <b>5120 W. 158TH STREET OVERLAND PARK, KS 66224 US</b>
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**DO NOT WRITE IN THIS SPACE**



07042007No Chg-LLC CR2E083 (11/05)

4. FEI Number <b>20-4192121</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**JOHN, ROLLESTON  
5427 SAGO PALM COURT  
ORLANDO, FL 32819**

**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 reappointing) DATE 7/9/07

**Filing Fee is \$50.00  
Due by September 14, 2007**

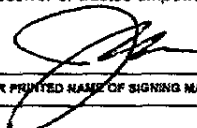
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07/12/07-800008-012 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ROLLESTON, JOHN 5120 W. 158TH STREET OVERLAND PARK, KS 66224
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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:  DATE 7/9/07  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Daytime Phone #