2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000116752

1. Entity Name

ROCHELLE HOLDINGS I, LLC



FILED Apr 30, 2008 08:00 AN Secretary of State

Principal Place of Business

1900 SUMMIT TOWER BLVD. SUITE 820

ORLANDO, FL 32810

Mailing Address

1900 SUMMIT TOWER BLVD.

SUITE 820

ORLANDO, FL 32810



01072008No Chg-LLC

CR2E083 (12/07)

4. FEI Number Applied For 75-3204923 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

PAYNE, CONNIE J 1900 SUMMIT TOWER BLVD., STE. 820 ORLANDO, FL 32810



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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, types or printed name of registered agent and bile if applicable	(NOTE: Registered Agent signature required when reinstaling)	DATE	
FILE NOW!!! FEE IS \$138.75			

After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-SI-ZIP	MGRM PAYNE, CONNIE J 1900 SUMMIT TOWR BLVD. SUITE 820 ORLANDO, FL 32810
TITLE NAME STREET ADDRESS GTY-ST-ZIP	
NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY+ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

11. Thereby 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING