## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED Apr 24, 2007 8:00 am Secretary of State

DOCUMENT # L06000007962  1. Entity Name RC INVESTMENTS LLC								90116 024 ****50	
Principal Plac	ce of Business		Mailing Address		<u> </u>	=	•		
880 LINCOLI Deland, Fl		¢	880 LINCOLN ROAD Deland, Fl 32724	US					
DEENIO, IL	32724 0.	3	DELPHO, 12 32/24	03		i (Banan A	71 <b>86</b> 115 8711 <b>86</b> 111 <b>86</b> 111 <b>8</b> 811	II <b>Ba</b> lik <b>Paril Mark (Balb Briss</b> ka	
2. Principal Place of Business - No P.O. Box #			3. Mailing Address						
Suite, Apt. #, etc.			Suite, Apt. #, etc.			01192007	Chg-LLC	CR2E083 (12/06)	
City & State			City & State			4. FEI Numb		A A	oplied For ot Applicable
Zip		Country	Zip	Coun	try		of Status Desired	55.00 Add	ditional
	6. Name a	and Address of Current I	Registered Agent			7. Name and	d Address of New R		
ZIMMERM	IAN, MARK	A ESQ.			Name Also	ert J.	RAZZet	<i>+,</i> '	
431 E. NE	W YORK A			Street Address (			er is Not Acceptable	e)	
DELAND,	FL 32/21			ļ	0 1	Linco	7V ~ C		
					City	unal		FL Zip Coot	e
8. The above	named entity	submits this statement for	the purpose of changing its	registere	ed office or register	red agent, or bo	oth, in the State of Flo		and accept
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 Signature, typed or perfect name of registered agent and title II applicable (NOTE: Registered Agent signature required when refirstating)  DATE									<del></del>
	····· · · · · · · · · · · · · · · · ·								
Filing Fee is \$50.00 Due by May 1, 2007								e check payable to Department of Stat	•
		MANAGING MEMBE	RS/MANAGERS	10.			ADDITIONS/	CHANGES	
9.	18:00-	a A		TITLE	: 1				☐ Addition
TITLE	DIRECT	OR S CORBYONS	☐ Delete		i i			☐ Change	
TITLE NAME STREET ADDRESS	DIRECTI THOMA 330 L	OR S CORBYONS ake Winnemmi	ssett Dr.	NAMI	i i			Change	_
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTI THOMPS 330 Li Delar	or s corbyons ate Winnemmi nd , FL 32	184	NAMI Stre City	E Et address -St-Zip			•	
TITLE NAME STREET ADDRESS	DIRECTI THOMA 330 Li Dela	or corbyons ake Winnemmi nd , FL 32	Sett Dr. 724	NAMI STRE CITY TITLE	E ET ADDRESS -ST-ZIP			☐ Change	☐ Addition
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