

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000012198

Entity Name: ROSMIC LLC

FILED  
Apr 23, 2008  
Secretary of State

**Current Principal Place of Business:**

10181 BELLA VISTA COURT, #404  
MIROMAR LAKES, FL 33913

**New Principal Place of Business:**

**Current Mailing Address:**

10181 BELLA VISTA COURT, #404  
MIROMAR LAKES, FL 33913

**New Mailing Address:**

FEI Number: 20-4411957

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FOWLER WHITE BOGGS BANKER, P.A.  
5811 PELICAN BAY BOULEVARD, SUITE 600  
NAPLES, FL 34108 US

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

FOWLER WHITE BOGGS BANKER, P.A.  
ATTN: GAREY F. BUTLER  
2235 FIRST STREET  
FORT MYERS, FL 33901 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:

04/23/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: ROSALIE MARGARET ROT, HLIN  
Address: 10181 BELLA VISTA COURT, #404  
City-St-Zip: MIROMAR LAKES, FL 33913

Title: MGR (X) Delete  
Name: MICHAEL ANDREAS ROTH, LIN  
Address: 10181 BELLA VISTA COURT, #404  
City-St-Zip: MIROMAR LAKES, FL 33913

**ADDITIONS/CHANGES:**

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 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: ROSALIE MARGARET ROTHLIN

MGR

04/23/2008

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