

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000043833

Entity Name: RSS INVESTMENTS, LLC

FILED
Feb 19, 2009
Secretary of State

Current Principal Place of Business:

505 SOUTH FLAGLER DRIVE, SUITE 1100
WEST PALM BEACH, FL 33401

New Principal Place of Business:

431 UNIVERSITY BLVD.
JUPITER, FL 33458 US

Current Mailing Address:

505 SOUTH FLAGLER DRIVE, SUITE 1100
WEST PALM BEACH, FL 33401

New Mailing Address:

431 UNIVERSITY BLVD.
JUPITER, FL 33458 US

FEI Number: 20-4768293

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES FOSTER SERVICE, LLC
505 SOUTH FLAGLER DRIVE, SUITE 1100
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

JONES FOSTER SERVICE, LLC
505 SOUTH FLAGLER DRIVE
SUITE 1100
WEST PALM BEACH, FL 33401 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: DAVID E. BOWERS, ESQ.

02/19/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SHAPIRO, HENRY J M.D.
Address: 345 JUPITER LAKES BLVD, STE 104
City-St-Zip: JUPITER, FL 33458

Title: MGRM () Delete
Name: REICH, ELIZABETH A M.D.
Address: 345 JUPITER LAKES BLVD, STE 104
City-St-Zip: JUPITER, FL 33458

Title: MGRM () Delete
Name: SANCHEZ, JUAN E M.D.
Address: 345 JUPITER LAKES BLVD, STE 104
City-St-Zip: JUPITER, FL 33458

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SHAPIRO, HENRY J M.D.
Address: 431 UNIVERSITY BLVD.
City-St-Zip: JUPITER, FL 33458 US

Title: MGRM (X) Change () Addition
Name: REICH, ELIZABETH A M.D.
Address: 431 UNIVERSITY BLVD.
City-St-Zip: JUPITER, FL 33458 US

Title: MGRM (X) Change () Addition
Name: SANCHEZ, JUAN E M.D.
Address: 431 UNIVERSITY BLVD.
City-St-Zip: JUPITER, FL 33458 US

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: HENRY J. SHAPIRO, M.D.

MGRM

02/19/2009

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