

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000061711

Entity Name: RUG VALUES, LLC

FILED  
Mar 27, 2007  
Secretary of State

**Current Principal Place of Business:**

29703 EAGLE STATION DRIVE  
WESLEY CHAPEL, FL 33543

**New Principal Place of Business:**

**Current Mailing Address:**

29703 EAGLE STATION DRIVE  
WESLEY CHAPEL, FL 33543

**New Mailing Address:**

FEI Number: 20-5063819

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RIMAS, PATTIE  
29703 EAGLE STATION DRIVE  
WESLEY CHAPEL, FL 33543 US

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

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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MCLEOD, JOHN JR  
Address: 29703 EAGLE STATION DRIVE  
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: MGRM ( ) Delete  
Name: MCLEOD, MIKE  
Address: 3601 S WAVERLY PLACE  
City-St-Zip: TAMPA, FL 33629

Title: MGRM ( ) Delete  
Name: RIMAS, PATTIE  
Address: 29703 EAGLE STATION DRIVE  
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: MGR ( ) Delete  
Name: MCLEOD, JEAN  
Address: 4118 CYPRESS BAYOU DRIVE  
City-St-Zip: TAMPA, FL 33627

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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: PATTIE RIMAS

MGRM

03/27/2007

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