

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000096123

Entity Name: RAINBOW STABLE LLC

FILED
Apr 23, 2009
Secretary of State

Current Principal Place of Business:

C/O KIERZYNSKI & ASSOCIATES CPA, P.A.
5143 COMMERCIAL WAY
SPRING HILL, FL 34606

New Principal Place of Business:

Current Mailing Address:

C/O KIERZYNSKI & ASSOCIATES CPA, P.A.
5143 COMMERCIAL WAY
SPRING HILL, FL 34606

New Mailing Address:

FEI Number: 33-1159449

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KIERZYNSKI, MICHAEL
5143 COMMERCIAL WAY
SPRING HILL, FL 34606 US

Name and Address of New Registered Agent:

KIERZYNSKI, MICHAEL J
5143 COMMERCIAL WAY
SPRING HILL, FL 34606 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: MICHAEL J. KIERZYNSKI

04/23/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MEDIN, STEFAN
Address: TJOLOHOLMSVAGEN 98
City-St-Zip: 430 33 FJARAS SWEDEN, XX

Title: MGR () Delete
Name: MEDIN, CHRISTINA
Address: TJOLOHOLMSVAGEN 98
City-St-Zip: 430 33 FJARAS SWEDEN, XX

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: MICHAEL J. KIERZYNSKI

RA

04/23/2009

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