

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000099882

Entity Name: RIBRO, LLC

FILED
Apr 21, 2009
Secretary of State

Current Principal Place of Business:

4 ST JOHNS MEDICAL PARK DRIVE
ST AUGUSTINE, FL 32086

New Principal Place of Business:

Current Mailing Address:

148 FONSECA DRIVE
ST AUGUSTINE, FL 32086

New Mailing Address:

FEI Number: 20-5715318

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HAEUSSNER, T DANIEL
148 FONSECA DRIVE
ST AUGUSTINE, FL 32086 US

Name and Address of New Registered Agent:

HAEUSSNER, T DANIEL DMD
148 FONSECA DRIVE
ST AUGUSTINE, FL 32086 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: T. DANIEL HAEUSSNER

04/21/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HAEUSSNER, T DANIEL
Address: 148 FONSECA DRIVE
City-St-Zip: ST AUGUSTINE, FL 32086

Title: MGRM () Delete
Name: HAEUSSNER, KARA
Address: 148 FONSECA DRIVE
City-St-Zip: ST AUGUSTINE, FL 32086

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HAEUSSNER, T DANIEL DMD
Address: 148 FONSECA DRIVE
City-St-Zip: ST AUGUSTINE, FL 32086

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: T. DANIEL HAEUSSNER

MGRM

04/21/2009

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