2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 09, 2008
Secretary of State

DOCUMENT# L07000009342

Entity Name: RUMBLING PRIDE LTD. CO.

Current Principal Place of Business:

5238 QUIET CREEK LANE
LAKELAND, FL 33811

New Principal Place of Business:

4804 ACORN DR N
LAKELAND, FL 33810

Current Mailing Address:

5238 QUIET CREEK LANE
LAKELAND, FL 33811

New Mailing Address:

4804 ACORN DR N
LAKELAND, FL 33810

FEI Number: 61-1519833 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FRANKE, CHARITY
5238 QUIET CREEK LANE
LAKELAND, FL 33811 US

Name and Address of New Registered Agent:

FRANKE, CHARITY
4804 ACORN DR N
LAKELAND, FL 33810 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: 04/09/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: FRANKE, KEVIN
Address: 5238 QUIET CREEK LANE
City-St-Zip: LAKELAND, FL 33811

Title: MGRM ( ) Delete
Name: FRANKE, CHARITY
Address: 5238 QUIET CREEK LANE
City-St-Zip: LAKELAND, FL 33811

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: FRANKE, KEVIN
Address: 4804 ACORN DR N
City-St-Zip: LAKELAND, FL 33810

Title: MGRM (X) Change ( ) Addition
Name: FRANKE, CHARITY
Address: 4804 ACORN DR N
City-St-Zip: LAKELAND, FL 33810

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: CHARITY FRANKE MGRM 04/09/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date