

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Feb 22, 2008 8:00 am**  
**Secretary of State**

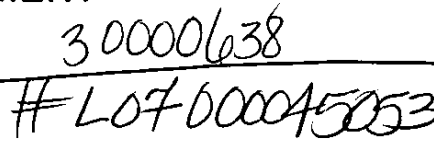
01-14-2008 90050 042 \*\*\*138.75

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02192008 Chg-LLC CR2E083 (12/06)

<b>DOCUMENT # L07000045053</b> 1. Entity Name <b>RCH CAPITAL RESOURCES, LLC</b>					
Principal Place of Business <b>333 THIRD AVENUE NORTH, SUITE 400 ST. PETERSBURG, FL 33701</b>			Mailing Address <b>333 THIRD AVENUE NORTH, SUITE 400 ST. PETERSBURG, FL 33701</b>		
2. Principal Place of Business - No P.O. Box # <b>360 Central Avenue</b> Suite, Apt. #, etc. <b>Suite 250</b>		3. Mailing Address <b>360 Central Avenue</b> Suite, Apt. #, etc. <b>Suite 250</b>		4. FEI Number <b>26-0377203</b> Applied For <input type="checkbox"/> Not Applicable	
City & State <b>St. Petersburg, FL</b>		City & State <b>St. Petersburg, FL</b>			
Zip <b>33701</b>		Country <b>USA</b>			
5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b>		6. Name and Address of Current Registered Agent  <b>RAZOOK, FRED S 333 THIRD AVENUE NORTH, SUITE 400 ST. PETERSBURG, FL 33701</b>			
7. Name and Address of New Registered Agent Name <b>Fred S. Razook, Jr.</b> Street Address (P.O. Box Number is Not Acceptable) <b>360 Central Avenue</b> Suite <b>Suite 250</b> City <b>St. Petersburg</b> <b>FL</b> Zip Code <b>33701</b>					
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <b>2/19/08</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75</b>			<b>Make check payable to Florida Department of State</b>		
<b>9. MANAGING MEMBERS/MANAGERS</b>			<b>10. ADDITIONS/CHANGES</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
			Mgr <b>Fred S. Razook, Jr.</b> <b>360 Central Ave, Suite 250</b> <b>St. Petersburg, FL 33701</b>		
			Mgr <b>Richard J. Razook</b> <b>360 Central Ave, Suite 250</b> <b>St. Petersburg, FL 33701</b>		
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.					
<b>SIGNATURE:</b> <b>Fred S. Razook, Jr.</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>			<b>2/19/08</b> <small>Date</small>		<b>727-821-6000</b> <small>Daytime Phone #</small>



**Amount: \$138.75**

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