

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000076648

FILED  
Jun 15, 2009  
Secretary of State

**Entity Name:** RITTER KITCHEN, BATH & CLOSET, LLC

**Current Principal Place of Business:**

2362 BUTTERFLY PALM DR  
NAPLES, FL 34119

**New Principal Place of Business:**

**Current Mailing Address:**

2362 BUTTERFLY PALM DR  
NAPLES, FL 34119

**New Mailing Address:**

FEI Number: 26-0596521      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

RITTER, ROBERT C  
2362 BUTTERFLY PALM DR  
NAPLES, FL 34119      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: RITTER, ROBERT C  
Address: 479 PINE AVE  
City-St-Zip: NAPLES, FL 34108

**ADDITIONS/CHANGES:**

Title: MGRM      (X) Change      ( ) Addition  
Name: RITTER, ROBERT C  
Address: 2362 BUTTERFLY PALM DR.  
City-St-Zip: NAPLES, FL 34119

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: CHUCK RITTER

PRES

06/15/2009

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