

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000089441

FILED  
Apr 09, 2008  
Secretary of State

**Entity Name:** REDER INVESTIGATIONS AND SECURITY CONSULTING, LLC

**Current Principal Place of Business:**

202 CRYSTAL GROVE BLVD.  
LUTZ, FL 33548 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 271162  
TAMPA, FL 33688 US

**New Mailing Address:**

**FEI Number:** 26-0898754

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SMALL BUSINESS ACCOUNTING SERVICES  
202 CRYSTAL GROVE BLVD  
TAMPA, FL 33548 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: REDER, ROD  
Address: PO BOX 271162  
City-St-Zip: TAMPA, FL 33688 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP ( ) Change (X) Addition  
Name: REDER, SANDRA L  
Address: PO BOX 271162  
City-St-Zip: TAMPA, FL 33688 US

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: ROD REDER

MGRM

04/09/2008

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