2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000093423

Entity Name: SHADOW SERVICES RSP, LLC

FILED Aug 28, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

911 SW MCELROY AVE

PORT ST LUCIE, FL 34953 US

Current Mailing Address: New Mailing Address:

911 SW MCELROY AVE

PORT ST LUCIE, FL 34953 US

FEI Number: 37-1549844 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: Name and Address of New Registered Agent:

GRAY, CLIFFORD S GRAY, HEATHER L
911 SW MCELROY AVE 911 SW MCELROY AVE

PORT ST LUCIE, FL 34953 US PORT ST LUCIE, FL 34953 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: HEATHER L GRAY 08/28/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 GRAY, SCOTT
 Name:

 Address:
 911 SW MCELROY AVE
 Address:

 City-St-Zip:
 PORT ST LUCIE, FL 34953 US
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 GRAY, HEATHER
 Name:

 Address:
 911 SW MCELROY AVE
 Address:

 City-St-Zip:
 PORT ST LUCIE, FL 34953 US
 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: HEATHER L GRAY MGRM 08/28/2008