2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000095176

Entity Name: RGN SERVICES PLUS LLC

FILED Apr 28, 2008 Secretary of State

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

6100 STEVENSON DR UNIT 210 6100 STEVENSON DR. ORLANDO, FL 32835 #210

ORLANDO, FL 32835

ADDITIONS/CHANGES:

Current Mailing Address: New Mailing Address:

PO BOX 618004 ORLANDO, FL 32861

FEI Number: 11-3826312 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MARIN, GRACE J MARIN, GRACE J 6100 STEVENSON DR UNIT 210

6100 STEVENSON DR. UNIT 210 ORLANDO, FL 32835 ORLANDO, FL 32835

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: 04/28/2008

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

MGR Title: () Delete (X) Change () Addition

MARIN, ALAIN R MARIN, ALAIN R Name: Name: Address: 4146 WHITE PINE AVE Address: 4146 WHITE PINE AVE City-St-Zip: ORLANDO, FL 32811 City-St-Zip: ORLANDO, FL 32811 US

(X) Change () Addition Title: MGR () Delete Title: MGR Name: OSOSRIO, RUBEN D Name: OSOSRIO, RUBEN D

Address: 6100 STEVENSON DR UNIT 210 Address: 6100 STEVENSON DR. UNIT 210 City-St-Zip: ORLANDO, FL 32835 City-St-Zip: ORLANDO, FL 32835 US

Title: MGRM () Delete Title: MGRM (X) Change () Addition MARIN, GRACE J Name: MARIN, GRACE J Name:

6100 STEVENSON DR UNIT 210 6100 STEVENSON DR. UNIT 210 Address: Address:

City-St-Zip: ORLANDO, FL 32835 City-St-Zip: ORLANDO, FL 32835 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: GRACE J. MARIN **MGRM** 04/28/2008