

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000099434

FILED  
May 10, 2010  
Secretary of State

**Entity Name:** ROTAGILLA ENTERPRISES LLC

**Current Principal Place of Business:**

3125 CARRIAGE MANOR CIRCLE  
TALLAHASSEE, FL 32304

**New Principal Place of Business:**

1501 CAPITAL CIRCLE NW  
TALLAHASSEE, FL 32303

**Current Mailing Address:**

P.O. BOX 180004  
TALLAHASSEE, FL 32318

**New Mailing Address:**

FEI Number: 26-1173420      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:**

PONS, DAVID L  
3125 CARRIAGE MANOR CIRCLE  
TALLAHASSEE, FL 32304      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: PONS, DAVID L  
Address: 3125 CARRIAGE MANOR CIRCLE  
City-St-Zip: TALLAHASSEE, FL 32303

Title: MGRM  
Name: COKER, LINDA K  
Address: 3132 PLESANT CT  
City-St-Zip: TALLAHASSEE, FL 32303

I hereby 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: DAVID L. PONS

MGRM

05/10/2010

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