2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 16, 2009
Secretary of State

DOCUMENT# L07000104445

Entity Name: R. COVE 3, LLC

Current Principal Place of Business:

C/O JACK O. HACKETT II
99 NESBIT STREET
PUNTA GORDA, FL 33950

New Principal Place of Business:

Current Mailing Address:

C/O JACK O. HACKETT II
99 NESBIT STREET
PUNTA GORDA, FL 33950

New Mailing Address:

FEI Number: 26-1766286 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HACKETT, JACK O II
FARR, FARR, EMERICH, HACKETT AND CARR, P.A
99 NESBIT STREET
PUNTA GORDA, FL 33950 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: MGR ( ) Delete
Name: KONSTANT, DONNA M
Address: 16 OLD GREEN BAY ROAD
City-St-Zip: WINNETKA, IL 60093

Title: MGR ( ) Delete
Name: HZAELWOOD, KATHERINE
Address: 270 SCOTT AVENUE
City-St-Zip: WINNETKA, IL 60093

ADDITIONS/CHANGES:

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

Title: MGR (X) Change ( ) Addition
Name: HAZELWOOD, KATHERINE
Address: 270 SCOTT AVENUE
City-St-Zip: WINNETKA, IL 60093

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: DONNA M. KONSTANT MGR 04/16/2009

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