2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000109865

Entity Name: ROATAN 4, LLC

Address:

City-St-Zip:

7 HUDSON WAY

GARNET VALLEY, PA 19061

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: POMPANO BEACH, FL 33060 **Current Mailing Address: New Mailing Address:** 840 SE 13 CT POMPANO BEACH, FL 33060 FEI Number: 26-1210760 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: SHIPLE, CRAIG P 840 SE 13 CT. POMPANO BEACH, FL 33060 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: ADDITIONS/CHANGES: MGRM () Delete Title: () Change () Addition SHIPLE, CRAIG P Name: Name: Address: 840 SE 13 CT. Address: City-St-Zip: POMPANO BEACH, FL 33060 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: SHIPLE, BRIAN J Name: Address: 525 COUNTRY CLUB DR. Address: City-St-Zip: WILMINGTON, DE 19803 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition KICHAN, ANDREW Name: Name: Address: 8744 PASO ROBLES AVE. Address: City-St-Zip: NORTHRIDGE, CA 91325 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: TANCREDI, MICHAEL Name:

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.

Address:

City-St-Zip:

SIGNATURE: CRAIG P. SHIPLE MGRM 04/30/2009