

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000116443

FILED  
Apr 22, 2009  
Secretary of State

**Entity Name:** ROLLING HILLS MANAGEMENT GROUP, LLC

**Current Principal Place of Business:**

997 S PALAFOX ST  
2ND FLOOR  
PENSACOLA, FL 32502

**New Principal Place of Business:**

6990 ROLLING HILLS RD  
PENSACOLA, FL 32505

**Current Mailing Address:**

997 S PALAFOX ST  
2ND FLOOR  
PENSACOLA, FL 32502

**New Mailing Address:**

6990 ROLLING HILLS RD  
PENSACOLA, FL 32505

**FEI Number:** 26-1438689

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COVER, ALEXANDER L  
997 S PALAFOX ST  
2ND FLOOR  
PENSACOLA, FL 32502 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: MGRM ( ) Delete  
Name: COVER, ALEXANDER L  
Address: 997 S PALAFOX ST  
City-St-Zip: PENSACOLA, FL 32502

Title: MGRM ( ) Delete  
Name: MCCRAY, DANNY L  
Address: 997 S PALAFOX ST  
City-St-Zip: PENSACOLA, FL 32502

Title: MGMR ( ) Delete  
Name: JORDAN, THOMAS  
Address: 910 LAKE AIRE DRIVE  
City-St-Zip: PENSACOLA, FL 32506

**ADDITIONS/CHANGES:**

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

Title: MGRM (X) Change ( ) Addition  
Name: DAVIDSON, CHARLES  
Address: 3919 W. MADURA RD  
City-St-Zip: GULF BREEZE, FL 32563

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: CHARLES DAVIDSON

MGRM

04/22/2009

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