2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000125273

Entity Name: TBBT UTILITY LLC

RMDM LLC

11375 UPTON ROAD

GRAND LEDGE, MI 48837 US

Name:

Address:

City-St-Zip:

FILED Jul 27, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 6384 LAKE LEELANAU DRIVE 9414 LORENDALE CIRCLE TRAVERSE CITY, MI 49684 SPRING HILL, FL 34608 **Current Mailing Address: New Mailing Address:** 6384 LAKE LEELANAU DRIVE TRAVERSE CITY, MI 49684 FEI Number: 26-1650325 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: HALL, TERRIE M MOONEY, TODD A 1512 ÉL DORADO PARKWAY WEST 9414 LORENDALE CIRCLE CAPE CORAL, FL 33914 US SPRING HILL, FL 34608 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: TODD A. MOONEY 07/27/2009 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete SBTB ENTERPRISES, LLC Name: Name: Address: 9414 LORENDALE CIRCLE Address: City-St-Zip: SPRINGHILL, FL 34608 US City-St-Zip: Title: MGR Title: () Delete () Change () Addition Name: HAR-LEE, LLC Name: Address: 6384 LAKE LEELANAU DRIVE Address: City-St-Zip: TRAVERSE CITY, MI 49604 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition MOONTL II, LLC Name: Name: 237 NW TORCH LAKE DRIVE Address: Address: City-St-Zip: KEWADIN, MI 49648 US City-St-Zip: () Delete Title: MGR Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: TODD A. MOONEY MBR 07/27/2009