

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000015013

Entity Name: ROCKHAN GROUP LLC

FILED  
Apr 21, 2009  
Secretary of State

**Current Principal Place of Business:**

4107 MEANDER PLACE  
SUITE 201  
ROCKLEDGE, FL 32955 US

**New Principal Place of Business:**

**Current Mailing Address:**

4107 MEANDER PLACE  
SUITE 201  
ROCKLEDGE, FL 32955 US

**New Mailing Address:**

310 MURRELL ROAD  
P.O. BOX 186  
ROCKLEDGE, FL 32955

FEI Number: 26-1983414

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

KHAN, NINA  
4107 MEANDER PLACE  
SUITE 201  
ROCKLEDGE, FL 32955 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: KAHN, NINA  
Address: 4107 MEANDER PLACE, STE 201  
City-St-Zip: ROCKLEDGE, FL 32955 US

Title: MGR ( ) Delete  
Name: KAHN, PETER  
Address: 4107 MEANDER PLACE, STE 201  
City-St-Zip: ROCKLEDGE, FL 32955 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: KAHN, NINA  
Address: 4107 MEANDER PLACE, SUITE 201  
City-St-Zip: ROCKLEDGE, FL 32955 US

Title: MGR (X) Change ( ) Addition  
Name: KAHN, PETER  
Address: 4107 MEANDER PLACE, SUITE 201  
City-St-Zip: ROCKLEDGE, FL 32955 US

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: NINA KHAN

MGR

04/21/2009

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