

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000047248

Entity Name: DONALD RUSE, LLC

FILED  
Jan 30, 2009  
Secretary of State

**Current Principal Place of Business:**

1416 SW SANTA BARBARA PLACE  
CAPE CORAL, FL 33991

**New Principal Place of Business:**

**Current Mailing Address:**

1416 SW SANTA BARBARA PLACE  
CAPE CORAL, FL 33991

**New Mailing Address:**

FEI Number: 26-2628399

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DONALD, RUSE  
1416 SW SANTA BARBARA PLACE  
CAPE CORAL, FL 33991 US

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

RUSE, DONALD  
1416 SW SANTA BARBARA PLACE  
CAPE CORAL, FL 33991 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: DONALD RUSE

01/30/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: DONALD, RUSE  
Address: 1416 SW SANTA BARBARA PLACE  
City-St-Zip: CAPE CORAL, FL 33991

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: RUSE, DONALD  
Address: 1416 SW SANTA BARBARA PLACE  
City-St-Zip: CAPE CORAL, FL 33991

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: DONALD RUSE

MGRM

01/30/2009

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