

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000049592

FILED
Apr 05, 2009
Secretary of State

Entity Name: RONE MANAGEMENT, LLC

Current Principal Place of Business:

4625 TUSCANA DRIVE
SARASOTA, FL 34241

New Principal Place of Business:

Current Mailing Address:

4625 TUSCANA DRIVE
SARASOTA, FL 34241

New Mailing Address:

FEI Number: 26-2645762

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

STOLARSKI, EDWARD
4625 TUSCANA DRIVE
SARASOTA, FL 34241 US

Name and Address of New Registered Agent:

STOLARSKI, JOANN
4625 TUSCANA DRIVE
SARASOTA, FL 34241 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: JOANN STOLARSKI

04/05/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HARVEY, RONALD J
Address: 19 THORNBURUPL
City-St-Zip: SOUTHAMPTON, NH 08088

Title: MGRM () Delete
Name: STOLARSKI, EDWARD
Address: 4625 TUSCANA DRIVE
City-St-Zip: SARASOTA, FL 34241

Title: MGRM () Delete
Name: STOLARSKI, JOANN
Address: 4625 TUSCANA DRIVE
City-St-Zip: SARASOTA, FL 34241

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HARVEY, RONALD J
Address: 19 THORNBURY PL
City-St-Zip: SOUTHAMPTON, NJ 08088

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

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: JOANN STOLARSKI

MGRM

04/05/2009

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