

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000061279

FILED
Jan 25, 2009
Secretary of State

Entity Name: RAMBLIN' RHODES MUSIC, LLC

Current Principal Place of Business:

10720 STATE RD 54
NEW PORT RICHEY, FL 34655

New Principal Place of Business:

10720 STATE RD 54
105
NEW PORT RICHEY, FL 34655

Current Mailing Address:

10720 STATE RD 54
NEW PORT RICHEY, FL 34655

New Mailing Address:

10720 STATE RD 54
105
NEW PORT RICHEY, FL 34655

FEI Number: 26-2847509

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RHODES, JOSEPH C
2725 WESTBURY AVE
PALM HARBOR, FL 34685 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: RHODES, JOSEPH C
Address: 2725 WESTBURY AVE
City-St-Zip: PALM HARBOR, FL 34685 US

Title: MGRM () Delete
Name: RHODES, JASON D
Address: 10403 TASSEL ST
City-St-Zip: SPRING HILL, FL 34608 US

Title: MGRM () Delete
Name: RHODES, LAURENE D
Address: 2725 WESTBURY AVE
City-St-Zip: PALM HARBOR, FL 34685 US

ADDITIONS/CHANGES:

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

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: JOSEPH C. RHODES

MGRM

01/25/2009

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