2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 07, 2009
Secretary of State

DOCUMENT# L08000101715

Entity Name: RICHARDSON MANAGEMENT COMPANY, LLC

Current Principal Place of Business:

211 HANCOCK BRIDGE PARKWAY, UNIT 6
CAPE CORAL, FL 33990

New Principal Place of Business:

Current Mailing Address:

211 HANCOCK BRIDGE PARKWAY, UNIT 6
CAPE CORAL, FL 33990

New Mailing Address:

FEI Number: 26-3657813 **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:

RICHARDSON, MONIQUE R
1211 HANCOCK BRIDGE PARKWAY
UNIT 6
CAPE CORAL, FL 33930 US

Name and Address of New Registered Agent:

RICHARDSON, MONIQUE R
211 HANCOCK BRIDGE PARKWAY
UNIT 6
CAPE CORAL, FL 33930 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: MONIQUE RICHARDSON 06/07/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: RICHARDSON, MONIQUE R
Address: 1211 HANCOCK BRIDGE PARKWAY, UNIT 6
City-St-Zip: CAPE CORAL, FL 33930

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: RICHARDSON, MONIQUE R
Address: 211 HANCOCK BRIDGE PARKWAY, UNIT 6
City-St-Zip: CAPE CORAL, FL 33930

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: MONIQUE RICHARDSON MGRM 06/07/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date