

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000112607

FILED  
Apr 25, 2009  
Secretary of State

Entity Name: RESOURCE GROUP INTERNATIONAL, LLC

**Current Principal Place of Business:**

777 SOUTH FLAGLER DRIVE  
SUITE 300  
WEST PALM BEACH, FL 33401

**New Principal Place of Business:**

**Current Mailing Address:**

777 SOUTH FLAGLER DRIVE  
SUITE 300  
WEST PALM BEACH, FL 33401

**New Mailing Address:**

FEI Number: 26-3875750      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BARRA, RICHARD K  
4400 PGA BOULEVARD  
SUITE 800  
PALM BEACH GARDENS, FL 33410 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: STODDARD, H C III  
Address: 3081 SWHARBOUR BLUFF PLACE  
City-St-Zip: PALM CITY, FL 34990 US

**ADDITIONS/CHANGES:**

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

Title: MGRM ( ) Delete  
Name: DERITA, THOMAS JR.  
Address: 777 SOUTH FLAGLER DRIVE SUITE 300  
City-St-Zip: WEST PALM BEACH, FL 33401 US

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: H CLIFFORD STODDARD III

MGRM

04/25/2009

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