

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000046159

Entity Name: R & I TRUCKING, LLC

FILED  
Mar 15, 2011  
Secretary of State

## Current Principal Place of Business:

1600 WEST 32ND STREET  
RIVIERA BEACH, FL 33404

## New Principal Place of Business:

12420 SWAIN ROAD  
LITTLE ORLEANS, MD 21766

## Current Mailing Address:

1600 WEST 32ND STREET  
RIVIERA BEACH, FL 33404

## New Mailing Address:

12420 SWAIN ROAD  
LITTLE ORLEANS, MD 21766

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DAVIS, MYRON  
1600 WEST 32ND STREET  
RIVIERA BEACH, FL 33404 US

## Name and Address of New Registered Agent:

DAVIS, MYRON T  
1600 WEST 32ND STREET  
RIVIERA BEACH, FL 33404 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: MYRON DAVIS

03/15/2011

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM  
Name: DAVIS, RACHEL S  
Address: 1600 WEST 32ND STREET  
City-St-Zip: RIVEIRA BEACH, FL 33404

Title: MGRM  
Name: DAVIS, MYRON T  
Address: 1600 WEST 32ND STREET  
City-St-Zip: RIVIERA BEACH, FL 33404

Title: MGRM  
Name: DAVIS, MICHELLE T  
Address: 12420 SWAIN ROAD  
City-St-Zip: LITTLE ORLEANS, MD 21766

Title: MGRM  
Name: DAVIS, IRA JR  
Address: 1600 WEST 32ND STREET  
City-St-Zip: RIVIERA BEACH, FL 33404

Title: MGRM  
Name: DAVIS, MICHAEL T  
Address: 1600 WEST 32ND STREET  
City-St-Zip: RIVIERA BEACH, FL 33404

I hereby 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: MICHELLE DAVIS

DR

03/15/2011

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