

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000068569

**FILED**  
**Apr 20, 2011**  
**Secretary of State**

**Entity Name:** RBC DISTRIBUTION TECHNOLOGIES, LLC

**Current Principal Place of Business:**

429 S. KELLER ROAD  
300  
ORLANDO, FL 32810

**New Principal Place of Business:**

**Current Mailing Address:**

429 S. KELLER ROAD  
300  
ORLANDO, FL 32810

**New Mailing Address:**

**FEI Number:** 27-2940854      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

ALLEN, WILLIAM R  
429 S. KELLER ROAD  
300  
ORLANDO, FL 32810 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  
Name: ALLEN, WILLIAM R  
Address: 6079 LINNEAL BEACH DRIVE  
City-St-Zip: APOPKA, FL 32703

Title: MGRM  
Name: WALKER, MICHELLE L  
Address: 11354 SHANDON PARK WAY  
City-St-Zip: WINDERMERE, FL 34786

Title: MGRM  
Name: MILES, JENNIFER  
Address: 1225 PARK POINTE LANE  
City-St-Zip: WINTER PARK, FL 32789

Title: MGRM  
Name: ALLEN, MARY F  
Address: 6079 LINNEAL BEACH DRIVE  
City-St-Zip: APOPKA, FL 32703

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: W. RILEY ALLEN

MGRM

04/20/2011

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