

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000052044

Entity Name: RPS DEVELOPMENT LLC

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

801 S. OLIVE AVENUE,  
APT. #1522  
WEST PALM BEACH,, FL 33401

**New Principal Place of Business:**

**Current Mailing Address:**

801 S. OLIVE AVENUE,  
APT. #1522  
WEST PALM BEACH, FL 33401

**New Mailing Address:**

41 IVY PLACE  
WAYNE, NJ 07470 US

FEI Number: 45-2061853

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SPINA, PETER  
801 S. OLIVE AVENUE,  
APT. #1522  
WEST PALM BEACH, FL 33401 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: SPINA, PETER A SR  
Address: 801 S. OLIVE AVENUE, APT. #1522  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: MGRM  
Name: SPINA, RONA  
Address: 801 S. OLIVE AVENUE, APT. #1522  
City-St-Zip: WEST PALM BEACH, FL 33401

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: RONA SPINA

MGR

04/30/2012

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