


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 30, 2008 08:00 AM
Secretary of State

| | |
|---|---|
| DOCUMENT # L97000001360 1. Entity Name RJO ASSOCIATES L.L.C. |  |
|---|---|

| | |
|--|--|
| Principal Place of Business 3645 CORTEZ ROAD WEST, SUITE 140 BRADENTON, FL 34210 | Mailing Address 3645 CORTEZ ROAD WEST, SUITE 140 BRADENTON, FL 34210 |
|--|--|



04282008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

| | |
|---|--|
| 4. FEI Number 65-0779771 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

5. Name and Address of Current Registered Agent

OSTER, R. RUSH
3645 CORTEZ ROAD WEST, SUITE 140
BRADENTON, FL 34210

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

| | |
|--|--|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGR OSTER, R. RUSH 3645 CORTEZ ROAD WEST, SUITE 140 BRADENTON, FL 34210 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGR OSTER, JOAN S. 3645 CORTEZ ROAD WEST, SUITE 140 BRADENTON, FL 34210 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |

U000000938015
05/23/08-80095-001 138.75

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Joan S. Oster JOAN S. OSTER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/28/08 941-756-3001
Date Daytime Phone #