

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000000887

Entity Name: R.L.R. SALES, LLC

FILED  
Apr 12, 2006  
Secretary of State

## Current Principal Place of Business:

ATTN: LEGAL DEPT.  
600 GILLAM RD.  
WILMINGTON, OH 45177

## New Principal Place of Business:

## Current Mailing Address:

ATTN: LEGAL DEPT.  
600 GILLAM RD.  
WILMINGTON, OH 45177

## New Mailing Address:

FEI Number: 02-0530950

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: MGR ( ) Delete  
Name: ROBERTS, RALPH L I  
Address: 600 GILLAM RD.  
City-St-Zip: WILMINGTON, OH 45177

Title: MGR ( ) Delete  
Name: ROBERTS, RALPH L II  
Address: 600 GILLAM RD.  
City-St-Zip: WILMINGTON, OH 45177

Title: MGR ( ) Delete  
Name: ROBERTS, ROBY L  
Address: 600 GILLAM RD.  
City-St-Zip: WILMINGTON, OH 45177

Title: MGR ( ) Delete  
Name: ROBERTS, MARY  
Address: 600 GILLAM RD.  
City-St-Zip: WILMINGTON, OH 45177

## ADDITIONS/CHANGES:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: JEFFREY C. WADE

AS

04/12/2006

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