

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000005509

Entity Name: BETZRUHEN, LLC

FILED
Jun 22, 2009
Secretary of State

Current Principal Place of Business:

3860 RECTOR N.E.
ROCKFORD, MI 49341

New Principal Place of Business:

Current Mailing Address:

PO BOX 352
C/ JAMES RADGENS
GRAND RAPIDS, MI 495010532

New Mailing Address:

PO BOX 352
C/ JAMES RADGENS
GRAND RAPIDS, MI 495010352

FEI Number: 38-3668720 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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: BETZ, KENNETH D
Address: 3860 RECTOR N.E.
City-St-Zip: ROCKFORD, MI 49341

Title: MGR () Delete
Name: BETZ, JUDY
Address: 3860 RECTOR N.E.
City-St-Zip: ROCKFORD, MI 49341

ADDITIONS/CHANGES:

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 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: JAMES A, RADGENS

CPA

06/22/2009

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