2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 28, 2007
Secretary of State

DOCUMENT# M06000004358

Entity Name: FLORIDA RSI/DELRAY, LLC

Current Principal Place of Business:

1740 NW SECOND STREET
DELRAY BEACH, FL 33444

New Principal Place of Business:

1471 WEST HILLSBORO BLVD
DELRAY BEACH, FL 33442

Current Mailing Address:

1740 NW SECOND STREET
DELRAY BEACH, FL 33444

New Mailing Address:

1471 WEST HILLSBORO BLVD
DELRAY BEACH, FL 33442

FEI Number: 65-0836259 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

CT 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:	PUGH, RONALD J	
Address:	2600 W MOUNT HOUSTON RD	
City-St-Zip:	HOUSTON, TX 77038	
Title:	MGR	(X) Delete
Name:	KENNEDY, JAMES D JR	
Address:	1740 NW SECOND STREET	
City-St-Zip:	DELRAY BEACH, FL 33444	
Title:	MGR	(X) Delete
Name:	BURNS, H RODNEY	
Address:	2251 STEMMONS TRAIL	
City-St-Zip:	DALLAS, TX 75220	
Title:	MGR	(X) Delete
Name:	DEGEORGE, JOHN	
Address:	1740 NW SECOND STREET	
City-St-Zip:	DELRAY BEACH, FL 33444	
Title:	MGR	(X) Delete
Name:	PERELLE, ALVIN A JR	
Address:	2251 STEMMONS TRAIL	
City-St-Zip:	DALLAS, TX 75220	
Title:	MGR	(X) Delete
Name:	VITALE, ROBERT A	
Address:	1740 NW SECOND STREET	
City-St-Zip:	DELRAY BEACH, FL 33444	

ADDITIONS/CHANGES:

Title:	MGRM	(X) Change ( ) Addition
Name:	ROOFING SUPPLY GROUP, , LLC	
Address:	3890 W. NORTHWEST HIGHWAY, STE 400	
City-St-Zip:	DALLAS, TX 75220	
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:		
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: CECILIA DAVENPORT VP 08/28/2007

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