2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000006961

Entity Name: RETAIL TECHNOLOGY LEASING, LLC

FILED Mar 20, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2 QUAIL RUN 222 GRAND FLORA WAY CRAWFORDVILLE, FL 32327 SANTA ROSA, FL 32459

Current Mailing Address: New Mailing Address:

2 QUAIL RUN 222 GRAND FLORA WAY CRAWFORDVILLE, FL 32327 SANTA ROSA, FL 32459

FEI Number: 20-5958479 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

NICHOLS, SUSAN
2 QUAIL RUN
2 RAWFORDVILLE, FL 32327 US

NICHOLS, SUSAN
222 GRAND FLORA WAY
SANTA ROSA, FL 32459 US

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: SUSAN NICHOLS 03/20/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 NICHOLS, ROBERT
 Name:
 NICHOLS, ROBERT

 Address:
 2 QUAIL RUN
 Address:
 222 GRAND FLORA WAY

 City-St-Zip:
 CRAWFORDVILLE, FL 32327
 City-St-Zip:
 SANTA ROSA, FL 32459

Title: MGR () Delete Title: MGR (X) Change () Addition

Name:NICHOLS, SUSANName:NICHOLS, SUSANAddress:2 QUAIL RUNAddress:222 GRAND FLORA WAYCity-St-Zip:CRAWFORDVILLE, FL 32327City-St-Zip:SANTA ROSA, FL 32459

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: SUSAN NICHOLS MGR 03/20/2009