

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000052372

FILED  
Mar 26, 2009  
Secretary of State

Entity Name: RIA, LLC

**Current Principal Place of Business:**

162 NW BIRDIE PLACE  
LAKE CITY, FL 32055

**New Principal Place of Business:**

**Current Mailing Address:**

162 NW BIRDIE PLACE  
LAKE CITY, FL 32055

**New Mailing Address:**

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired ( )

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

PATEL, MAHENDRA G  
162 NW BIRDIE PLACE  
LAKE CITY, FL 32055    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:                      MGRM                      ( ) Delete  
Name:                      PATEL, MAHENDRA G  
Address:                      162 NW BIRDIE PLACE  
City-St-Zip:                      LAKE CITY, FL 32055

Title:                      ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title:                      ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

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

Title:                      MGR                      ( ) Change (X) Addition  
Name:                      SHUKLA, JANAK R  
Address:                      3004 US HWY 90 WEST  
City-St-Zip:                      LAKECITY, FL 32055 US

Title:                      MGR                      ( ) Change (X) Addition  
Name:                      PATEL, ANILKUMAR D  
Address:                      1726, SW 27TH STREET  
City-St-Zip:                      OCALA, FL 34471 US

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: JANAK SHUKLA                      MGR                      03/26/2009

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