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## COMMONWEALTH OF KENTUCKY TREY GRAYSON, SECRETARY OF STATE ANNUAL REPORT DUE JUNE 30, 2008



ORGANIZATION ID # 0595515

STATE OR COUNTRY OF INCORPORATION

KY

ORGANIZATION DATE

09/23/2004

FILING FEE \$15.00

(1) EXACT LIMITED LIABILITY COMPANY NAME AND CURRENT PRINCIPAL OFFICE ADDRESS

Changes made to the principal office address cannot be made on this form. Check (3)A to request a form to be mailed or download the form from our web site

ROSE ISLAND PARTNERS, LLC 7400 SOUTH PARK PLACE LOUISVILLE, KY 40222

RECEIVED

MAR 0 5 2008

SECTETARY OF STATE COMMONWEALTH OF KY

(2) CURRENT REGISTERED AGENT AND REGISTERED OFFICE ADD	RESS
Changes made to the registered agent or registered office cannot be m	ade on this form.
Complete (3)B to request a form to be mailed or download form from w	eb site.

THOMAS N. RYAN, III 8000 ROSE ISLAND ROAD PROSPECT, KY 40059

(3)	3) A.   Statement of Change of Principal Office Address Form		
	В.	<ul> <li>□ Statement of Change of Registered Agman MAIL FORM TO</li> </ul>	gent or Registered Office Form
	ľ	WAIL FURM TO	

(4) MANAGEMENT. Verify the Management type. Foreign LLCs should indicate below whether they are managed by members or managers.

The LLC is managed by its members

(5) MANAGER(S) OR MEMBER(S) If (5) is blank, type or print the names and business addresses of the current managers, if manager-managed, or members, if member-managed. The annual report will be returned if business addresses are not listed. If the company has previously filed an annual report, verify the names of the managers or members listed below. Please note any additions to or changes in the names of managers or members and give the business address for each person listed.

Thomas N Ryan	
	Address
	Address
The Carlot	Address
	Address
	Address
Jesse C Bollinger R.Frank Taylor	Address Address

I VERIFY THAT THE INFORMATION IN THIS ANNUAL REPORT IS CURRENT AS OF THE DATE THIS REPORT IS EXECUTED.

Agnature of Manager or Member

THIMAS N RIANTIL

Type or Print Name

3/16/08 Date

## ANNUAL REPORT AND FILING FEE

Submit for filing the completed annual report form and correct filing fee as indicated above. Make check payable to the "Kentucky State Treasurer". Please do not send cash.

**MAILING ADDRESS** 

Trey Grayson Secretary of State P O Box 1150 Frankfort, KY 40602-1150 OFFICE LOCATION

Secretary of State State Capitol, Room 154 700 Capital Avenue Frankfort, KY 40601 (502)-564-2848 NOTE: P O Box 1150 is for annual report filings only.