

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 05, 2006 8:00 am
Secretary of State

07-05-2006 90105 023 ****55.00

DOCUMENT # L05000117753					
1. Entity Name R & R SITE DEVELOPMENT, LLC					
Principal Place of Business 27311 S. RIVERSIDE DRIVE BONITA SPRINGS, FL 34135 US			Mailing Address 27311 S. RIVERSIDE DRIVE BONITA SPRINGS, FL 34135 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	07022006 Chg-LLC CR2E083 (11/05)	
4. FEI Number 83-0442375				Applied For ☒ Not Applicable	
5. Certificate of Status Desired ☒				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent RAULERSON, RANDELL 27311 S. RIVERSIDE DRIVE BONITA SPRINGS, FL 34135			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$50.00 Due by September 6, 2006		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RAULERSON, RANDELL 27311 S. RIVERSIDE DRIVE BONITA SPRINGS, FL 34135	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RAULERSON, MARSHALL 27311 S. RIVERSIDE DRIVE BONITA SPRINGS, FL 34135	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RAULERSON, MARSHALL 27311 S. RIVERSIDE DRIVE BONITA SPRINGS, FL 34135	☐ Delete			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RAULERSON, MARSHALL 27311 S. RIVERSIDE DRIVE BONITA SPRINGS, FL 34135	☐ Delete			
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: <i>Randell Raulerson</i> Randell Raulerson 7/2/06 239-222-4630					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #					