

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Aug 18, 2006 08:00 AM
Secretary of State

DOCUMENT # L02000008867	
1. Entity Name RONAN DEVELOPERS, L.L.C.	
Principal Place of Business 900 NW 17TH AVENUE SUITE 202 DELRAY BEACH, FL 33445	Mailing Address 900 NW 17TH AVENUE SUITE 202 DELRAY BEACH, FL 33445



01092006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 82-0546439	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

POLERA, ANTHONY
900 NW 17TH AVE., SUITE 202
DELRAY BEACH, FL 33445

**DO NOT WRITE
IN THIS SPACE**

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

*Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	RADABAUGH, RENEE
STREET ADDRESS	352 NE 3RD AVE
CITY- ST- ZIP	DELRAY BEACH, FL 33444
TITLE	MGRM
NAME	POLERA, DEBRA
STREET ADDRESS	900 NW 17TH AVE STE 202
CITY- ST- ZIP	DELRAY BEACH, FL 33445
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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08/18/06-80003-018 50.00

**DO NOT WRITE
IN THIS SPACE**

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: *Debra Polera mgr member*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

05.01.06

Date

3812786800

Daytime Phone #