

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000027364

**FILED**  
**Jun 10, 2016**  
**Secretary of State**  
**CC2813308189**

**Entity Name:** ROGERS' RENTAL PROPERTIES LLC

**Current Principal Place of Business:**

3294 SPRUCE CREEK GLEN  
PORT ORANGE, FL 32128

**Current Mailing Address:**

3294 SPRUCE CREEK GLEN  
PORT ORANGE, FL 32128 US

**FEI Number:** 47-3130378

**Certificate of Status Desired:** No

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

SHIELDS, CAROL R  
3294 SPRUCE CREEK GLEN  
PORT ORANGE, FL 32128 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name SHIELDS, CAROL R  
Address 3294 SPRUCE CREEK GLEN  
City-State-Zip: PORT ORANGE FL 32128

Title AMBR  
Name SHIELDS, DAN J SR  
Address 3294 SPRUCE CREEK GLEN  
City-State-Zip: PORT ORANGE FL 32128

Title AMBR  
Name SHIELDS, MARY K  
Address 608 WOODLAKE DR  
City-State-Zip: LOUISVILLE KY 40245

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CAROL R SHIELDS

MGR

06/10/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date