

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 11, 2005 8:00 am
Secretary of State

04-11-2005 90051 006 ****50.00

DOCUMENT # L00000007793

1. Entity Name
R & B PROPERTIES, LLC



Principal Place of Business
**875 WEST PARK AVENUE
EDGEWATER, FL 32132**

Mailing Address
**875 WEST PARK AVENUE
EDGEWATER, FL 32132**

DO NOT WRITE IN THIS SPACE



04042005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number
59-3656112

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**SMITH, GEORGE JR.
3512 OMNI CIRCLE
EDGEWATER, FL 32141**

**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, if applicable.

(NOTE: Registered Agent Signature required when installing)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SMITH, GEORGE JR. 3512 OMNI CIRCLE EDGEWATER, FL 32141
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR POWERS, CLARENCE R 1969 S. GLENCOE RD. NEW SMYRNA BEACH, FL 32168
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: _____

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

4-4-05

Date

386 423-3076

Printing Name