2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L00000013195

1. Entity Name RKP, L.L.C.



FILED
Mar 20, 2007 08:00 AM
Secretary of State

Principal Place of Business

1880 SW SUNSET TR PALM CITY, FL 34990 Mailing Address

PO BOX 1817 STUART, FL 34995



03022007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 65-1050909 Applied For Not Applicable

5. Certificate of Status Desired

X

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

PRENTICE, REX N 1880 SW SUNSET TR PALM CITY, FL 34990

TITLE

STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CITY-ST-ZIP
CITY-ST-ZIP
CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

	above named entity submits this statement for the purpose of chabilities to be provided in the purpose of chabilities and the purpose of chabilities are not provided in the purpose of th	inging its registered office or registered agent, or both, in the State	of Florida. I am familiar with, and accept
	11/14		
SIGNAT	URE		
	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, 2007	_	
9.	MANAGING MEMBERS/MANAGERS		

MGRM TITLE PRENTICE, REX N NAME STREET ADDRESS 1880 SW SUNSET TR. CITY-ST-ZIP PALM CITY, FL 34990 TIFLE PRENTICE, KELLEE R NAME STREET ADDRESS 1880 SW SUNSET TR CITY-ST-7(P PALM CITY, FL 34990 TITLE NAME STREET ADDRESS CITY-ST-ZIP

U00000673257 03/29/07-80021-015 55.00

DO NOT WRITE IN THIS SPACE

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: AND TYPED OR PRINTED NAME OF BIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3-1-07 77-260-6251

Date

Daytime Phone #