## LIMITED LIABILITY COMPANY **UNIFORM BUSINESS REPORT (UBR)**

**DOCUMENT #** 

1. Entity Name

STREET ADDRESS

CITY - ST- ZIP

RSPB, LLC

2031310001001 05/01/30001001

02 JUN 12 PM 1:41 50.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

, <b>L</b>	O NOI WRITE	IN THIS SF	ACE	-	
2. Principal Pla	ace of Business	3. Malling Address	<del></del>		
9000 Bayhill Blvd. 9000 Bayhi		9000 Bayhill B	Rivd.		
		Suite, Apt. #, etc.			OT WRITE IN THIS SPACE
City & State				JO NO	A WRITE IN THIS SPACE
City & State			d- 22010	4. FEI Number	Applied For
Zip Country		Orlando, Florida 32819		59-3726134	Not Applicable
32819	USA	32819	Country USA	5. Certificate of Status De	estred   \$5.00 Additional
				7. Name and Address of C	Fee Required
DO NOT WRITE			Name Keith C. Austin, Jr. Street Address (P.O. Box Number is Not Acceptable)		
	7.7.	T L Viet Same	-		
	·		City	and the second second	Zip Code
8. The above named entity submits this statement for the purpose of changing its re-			Palm	Palm Beach FL Zip Code 33480	
	X = X	Ale barbase of changing its te	gistered office or r	egistered agent, or both, in the Stal	e of Florida.
SIGNATURE	ignature typed or printed name of vegistered a fant a		Keith C. A	ustin, Jr.	7/10/02
	~(	Make Check Payı Dü	E IS \$50:00 able to Departm E BY MAY 1	ent of State	DATE
9.	MANAGING MEMBER	S/MANAGERS			
TITLE NAME	ROBERT L. SAUNDERS,	T.T.	TITLE		:
TREET ADDRESS	9000 Bayhill Blvd.		NAME		
CITY-ST-ZIP	Orlando, FL 32819 - Managing Member		STREET ADDRESS CITY-ST-ZIP		. [3
IILE	PAUL S. BIRMINGHAM	riding Fieliber	TITLE		
	333 Peruvian Avenue		NAME		
	Palm Beach, FL 3348	O Mombow	STREET ADDRESS		5
TILE .			CITY - ST - ZIP	_	
LAME	•		TITLE		
TREET ADDRESS .			NAME EZOSSZ 4000SSS		
ITY-ST-ZIP			STREET ADDRESS CHTY-ST-ZIP	DO NO	T WRITE
ITLE			TITLE		
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TREET ADDRESS			STREET ADDRESS		
TLE		·	CITY: ST- ZIP		
AME			TITLE		
TREET ADDRESS			NAME STREET ADDRESS		
ITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP		
TLE			TITLE		
AME			NAME		

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.

CITY-ST-ZIP

STREET ADDRESS

SIGNATURE: UCOVOV \ QUIL BLOW LLL - FIRANG INS Daytime Phone



Please give original submission date as file date.

ACCOUNT NO. : 072100000032

REFERENCE : 660880

7323010

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE : July 12, 2002

ORDER TIME : 10:56 AM

ORDER NO. : 660880-005

CUSTOMER NO: 7323010

CUSTOMER: Laurie Davis, Legal Asst

Murphy, Reid & Pilotte, P.a.

340 Royal Palm Way

Suite 100

Palm Beach, FL 33480

## ANNUAL REPORT FILING

NAME: RSPB, LLC

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

NOTES: Our client previously tried to file this UBR on June 12, 2002.\_\_\_\_

CONTACT PERSON: Norma Hull-EXT#1115

EXAMINER'S INITIALS: