

**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 25, 2005 8:00 am**  
**Secretary of State**

04-25-2005 90098 040 \*\*\*\*50.00

**DOCUMENT # L02000004495**

1. Entity Name  
RHP, LLC



Principal Place of Business

880 JUPITER PARK DR  
STE 5  
JUPITER, FL 33458

Mailing Address

880 JUPITER PARK DR  
STE 5  
JUPITER, FL 33458

20045261



04062005 No Chg-LLC

CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
37-1424137

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

BAILEY, RONALD B  
8633 DAMASCUS DR.  
PALM BEACH GARDENS, FL 33418

**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, 2005**

9. **MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
BAILEY, RONALD B  
880 JUPITER PARK DR #5  
JUPITER, FL 33458

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
BAILEY, HOLLACE J  
880 JUPITER PARK DR #5  
JUPITER, FL 33458

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 606, Florida Statutes.

**SIGNATURE:** Ronald B Bailey

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

4-24-2005

Date

561-744-1410

Daytime Phone #

Ronald B. Bailey