

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 31, 2005 8:00 am
Secretary of State

01-31-2005 90201 034 ****50.00

DOCUMENT # L02000016017

1. Entity Name
R & R REAL PROPERTIES, LLC



Principal Place of Business
2274 STATE ROAD 580
CLEARWATER, FL 33763

Mailing Address
2274 STATE ROAD 580
CLEARWATER, FL 33763

20005266



01052005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
27-0030791

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

ROMAN & ROMAN, P.A.
2274 STATE ROAD 580
CLEARWATER, FL 33763

**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
ROMAN, THOMAS A
2274 STATE ROAD 580
CLEARWATER, FL 33763

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
ROMAN, PAULA C
2274 STATE ROAD 580
CLEARWATER, FL 33763

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
ROMAN, PETER T
2274 STATE ROAD 580
CLEARWATER, FL 33763

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: *Peter T. Roman*

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

Date

Daytime Phone #

1/27/05 727 736 2565