2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000026617

1. Entity Name RCD PROPERTIES, LLC

FILED Feb 23, 2004 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

1992 ILLINOIS AVENUE NE ST. PETERSBURG, FL 33703 US 1992 ILLINOIS AVENUE NE ST. PETERSBURG, FL 33703

%B,.,,,.22-39&

DO NOT WRITE IN THIS SPACE

02102004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 22-3877365

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

5. Name and Address of Current Registered Agent

CLARK, S. RENE 1992 ILLINOIS AVENUE NE ST. PETERSBURG, FL 33703

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 Iamiliar 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)

Filing Fee is \$50.00 Due by May 1, 2004

9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ACCRESS CITY-ST-ZP	MGRM CLARK, S. RENE 1992 ILLINOIS AVENUE NE ST. PETERSBURG, FL 33703	
HITE NAME STREET ADDRESS CHY-ST-ZIP		
THE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET AUDITESS		

U00000060801 02/23/04-80054-805 50.00

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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTH