

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000025347

**FILED**  
**Apr 02, 2010**  
**Secretary of State**

**Entity Name:** RH MT. DORA, LLC

**Current Principal Place of Business:**

5405 CYPRESS CENTER DRIVE STE. 320  
TAMPA, FL 33609

**New Principal Place of Business:**

**Current Mailing Address:**

5405 CYPRESS CENTER DRIVE STE. 320  
TAMPA, FL 33609

**New Mailing Address:**

**FEI Number:** 47-0936746

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HOLCOMB, VICTOR W  
201 NORTH ARMENIA AVE  
TAMPA, FL 33609 US

**Name and Address of New Registered Agent:**

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.

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** P  
**Name:** RATH, FRED H  
**Address:** 5405 CYPRESS CENTER DR, SUITE 320  
**City-St-Zip:** TAMPA, FL 33609

**Title:** VP  
**Name:** HARPER, WILLIAM H  
**Address:** 5405 CYPRESS CENTER DR, SUITE 320  
**City-St-Zip:** TAMPA, FL 33609

**Title:** ST  
**Name:** BLUNN, TIFFANY J  
**Address:** 5405 CYPRESS CENTER DRIVE, SUITE 320  
**City-St-Zip:** TAMPA, FL 33609 US

**Title:** VP  
**Name:** MARTLING, ROBERT A  
**Address:** 5405 CYPRESS CENTER DRIVE, SUITE 320  
**City-St-Zip:** TAMPA, FL 33609 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic 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:** ROBERT MARTLING

VP

04/02/2010

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date