


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000045703 1. Entity Name RLR ONE, LLC	
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FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

06 APR 19 PM 1:58

Principal Place of Business 17855 SW 248TH STREET HOMESTEAD, FL 33031	Mailing Address 17855 SW 248TH STREET HOMESTEAD, FL 33031
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01092006 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**RUTZKE, TINA M
 17855 SW 248TH STREET
 HOMESTEAD, FL 33031**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Signature, typed or printed name of registered agent and title if applicable.

Filing Fee is \$50.00
 Due by May 1, 2006

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RUTZKE, BARNEY W JR. 15600 SW 288TH STREET, #201 HOMESTEAD, FL 33033
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RUTZKE, TINA M 15600 SW 288TH STREET, #201 HOMESTEAD, FL 33033
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300074328153
 05/10/06--01012--006 **250.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:  4-11-06 305-246-1730

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #