


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Aug 14, 2007 08:00 AM
Secretary of State

DOCUMENT # L03000049093 1. Entity Name RUDOLPH BROWN PLUMBING CONTRACTOR, LLC	
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Principal Place of Business 511 COLLEGE AVENUE PANAMA CITY, FL 32401 US	Mailing Address 511 COLLEGE AVENUE PANAMA CITY, FL 32401 US
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DO NOT WRITE IN THIS SPACE



08042007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-0441055	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent BROWN, RUDOLPH 511 COLLEGE AVENUE PANAMA CITY, FL 32401

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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 <i>Rudolph Brown</i> <small>Signature, typed or printed name of registered agent and title if applicable.</small>	<i>RUDOLPH BROWN</i> <small>(NOTE: Registered Agent signature required when reappointing)</small>	<i>8-13-07</i> <small>DATE</small>

Filing Fee is \$50.00 Due by September 14, 2007
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9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BROWN, RUDOLPH 511 COLLEGE AVENUE PANAMA CITY, FL 32401
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DANIELS, JAMES 1524 S. KIMBREL AVENUE PANAMA CITY, FL 32404
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<p>U00000772053 08/14/07-80002-018 50.00</p> <p>DO NOT WRITE IN THIS SPACE</p>

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: <i>Rudolph Brown</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	<i>RUDOLPH BROWN</i> <small>Date</small>	<i>8/13/07</i> <small>Daytime Phone #</small>

850.785-5495