## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000014304

Entity Name
 R AND G, LLC



FILED
May 05, 2008 08:00 AN
Secretary of State

Principal Place of Business

1860 MIDTOWN DRIVE COLUMBUS, GA 31906

Mailing Address

1860 MIDTOWN DRIVE COLUMBUS, GA 31906



04302008No Chg-LLC

CR2E083 (12/07)

4. FEI Number 41-2130734 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BURKE, M. TODD ESQ 215 GRAND BLVD., STE. 101 DESTIN, FL 32550

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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.

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

(NOTE Registered Agent signature required when reinstating)

DATE

## FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR YARBROUGH, ROBERT 1860 MIDTOWN DRIVE COLUMBUS, GA 31906
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR COPELAN, GEORGE 194 LINDA LANE PINE MOUNTAIN, GA 31822
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000946442 05/30/08-80049-008 138.75

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11. I hereby certify that the information supplied with this filling 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 companyor the eceiver or trustee emponented to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MOCKEN Mishon

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Daytime Phone #