

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 01, 2007 08:00 A
Secretary of State

DOCUMENT # L04000023171

1. Entity Name
RECHERCHE DU TEMPS PERDU, LLC



Principal Place of Business

**12480 S.E. 136TH COURT
OCKLAWAHA, FL 32179**

Mailing Address

**P.O. BOX 104
OCKLAWAHA, FL 32183-0104**

DO NOT WRITE IN THIS SPACE



01172007No Chg-LLC

CR2E083 (11/05)

4. FEI Number
11-3715342

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**JONES, ROD
300 SOUTH ORANGE AVE., SUITE 1000
ORLANDO, FL 32801**

**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 _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

UD00000652581
03/12/07-80024-005 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	JONES, ROD
STREET ADDRESS	300 S ORANGE AVE STE 1000
CITY-ST-ZIP	ORLANDO, FL 32801

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

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IN THIS SPACE**

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: _____

Rod Jones, Mgr.

02-23-07

(407) 423-3200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #