

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000025809

Entity Name: RL PROPERTIES, LLC

FILED  
Mar 09, 2006  
Secretary of State

**Current Principal Place of Business:**

1219 S.W. COVERED BRIDGE RD.  
PALM CITY, FL 34990

**New Principal Place of Business:**

379 SW KESTOR DRIVE  
PORT ST LUCIE, FL 34953

**Current Mailing Address:**

1219 S.W. COVERED BRIDGE RD.  
PALM CITY, FL 34990

**New Mailing Address:**

379 SW KESTOR DRIVE  
PORT ST LUCIE, FL 34953

FEI Number: 13-4279515

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LOVOI, RAY  
1219 S.W. COVERED BRIDGE RD.  
PALM CITY, FL 34990 US

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

LOVOI, RAY  
379 SW KESTOR DRIVE  
PORT ST LUCIE, FL 34953 US

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: RAY LOVOI

03/09/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: LOVOI, RAY  
Address: 1219 S.W. COVERED BRIDGE RD.  
City-St-Zip: PALM CITY, FL 34990

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: LOVOI, RAY  
Address: 379 SW KESTOR DRIVE  
City-St-Zip: PORT ST LUCIE, FL 34953

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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: RAY LOVOI

MGR

03/09/2006

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