

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jun 26, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # L04000030838**

1. Entity Name  
RLA PROPERTIES, L.L.C.



Principal Place of Business  
639 HIDDEN RIVER DRIVE  
PORT ST. LUCIE, FL 34983

Mailing Address  
639 HIDDEN RIVER DRIVE  
PORT ST. LUCIE, FL 34983



06212006 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>75-3156320</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

FARRELL, RICKEY L  
1595 SE PORT LUCIE BOULEVARD  
PORT ST. LUCIE, FL 34952

**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 September 6, 2006**

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BURNS, TIMOTHY F 639 HIDDEN RIVER DRIVE PORT ST. LUCIE, FL 34983
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BURNS, KATHRYN M 639 HIDDEN RIVER DRIVE PORT ST. LUCIE, FL 34983
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000000567861  
06/26/06-80005-021 50.00

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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:** TIMOTHY BURNS  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

6/21/06 772-873-5488  
Date Daytime Phone #