

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT (AR) - DUE BY MAY 1, 2008**

FILED
Feb 25, 2008 8:00 am
Secretary of State

02-25-2008 90138 043 ***138.75

DOCUMENT # L04000037556

1. Entity Name

RG HUGHES PROPERTIES, LLC



Principal Place of Business

Mailing Address

~~141 N.E. 22ND STREET~~
~~WILTON MANORS FL 33305~~

~~141 N.E. 22ND STREET~~
~~WILTON MANORS FL 33305~~



2. Principal Place of Business - No P.O. Box #
201 ANSIN BLVD

3. Mailing Address
201 ANSIN BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E083 (10/07)

City & State

City & State

HALLANDALE FL.

HALLANDALE, FLORIDA

Zip

Country

Zip

Country

33009

BROWARD

33009

BROWARD

4. FEI Number

20-1215963

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CANTOR, JERALD C ESQ.
C/O PHILLIPS, EISINGER & BROWN, P.A.
4000 HOLLYWOOD BLVD., SUITE 265-S
HOLLYWOOD FL 33021

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Richard C. Cantor

(NOTE: Registered Agent Signature required when reconstituting)

2-14-08

DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008, Fee Will Be \$538.75
Make Check Payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
HUGHES, RICHARD
141 NORTHEAST 22 STREET
WILTON MANORS FL 33305 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
MCNALLY, DIANA D
1851 S OAK HAVEN CIRCLE
NORTH MIAMI BEACH FL 33170 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☒ Change ☐ Addition
201 ANSIN BLVD
HALLANDALE, FL 33009

TITLE
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☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Richard C. Cantor

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

2/14/08 954 4577777

Date

Daytime Phone #