

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000045831

FILED  
Apr 25, 2007  
Secretary of State

**Entity Name:** RAPENBURCH/GROSSE POINTE/SNSPF, LLC

**Current Principal Place of Business:**

15065 MCGREGOR BOULEVARD, SUITE 108  
FORT MYERS, FL 33908

**New Principal Place of Business:**

**Current Mailing Address:**

15065 MCGREGOR BOULEVARD, SUITE 108  
FORT MYERS, FL 33908

**New Mailing Address:**

FEI Number: 56-2465529

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HENSLEY, ROBERT D  
15065 MCGREGOR BOULEVARD, SUITE 108  
FORT MYERS, FL 33908 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: RAPENBURCH FLORIDA I, NC.  
Address: ONE INDEPENDENT DRIVE SUITE 1300  
City-St-Zip: JACKSONVILLE, FL 32202

Title: MGRM (X) Delete  
Name: GROSSE POINTE DEVELO, PMENT CO.  
Address: 15065 MCGREGOR BLVD STE 108  
City-St-Zip: FORT MYERS, FL 33908

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: J&B FLORIDA MANAGEME, NT CO. LLC  
Address: 15065 MCGREGOR BLVD #108  
City-St-Zip: FORT MYERS, FL 33908

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ROBERT D HENSLEY

CEO

04/25/2007

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