2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

DOCUMENT # L04000054873

1. Entity Name RS PROPERTIES OF NAPLES, LLC



FILED
Apr 16, 2007 08:00 AM
Secretary of State

Principal Place of Business

NAPLES, FL 34109

1010 6TH AVENUE SOUTH NAPLES, FL 34102 Mailing Address

1010 6TH AVENUE SOUTH NAPLES, FL 34102



01052007 No Chg-LLC

CR2E083 (11/05)

20-15/6479 Not Applicable	4. FEI Number 20-1576479	Applied For Not Applica	
20-15/6479 Not Applicable	20-1576479	Not Applica	ble

5. Certificate of Status Desired

\$5.00 Additional Fee Required

SMITH, RANDALL R 9120 THE LANE

DO NOT WRITE IN THIS SPACE

	•			
8. The above the obligat	named entity submits this statement for the purpose of char ions of registered agent.	nging its registered office o		te of Florida. I am familiar with, and accept
SIGNATURE.				· · · · · · · · · · · · · · · · · · ·
	Signature, typed or printed name of registered agent and like if applicable	(NOTE: Registered Agent signa	ture required when reinstaling)	DATE
Fi	ling Fee is \$50.00 ue by May 1, 2007			
9.	MANAGING MEMBERS/MANAGERS			
TITLE	MGR			
NAME	SMITH, RANDALL R			
STREET ADDRESS	1010 6TH AVENUE SOUTH			
CITY-ST-ZIP	NAPLES, FL 34102			
TITLE				
NAME				
STREET ADDRESS				
CITY ST-ZIP				
TITLE				
NAME				
STREET ADDRESS			DO NOT	' \8/C\TE
CITY-ST-ZIP			DO NOT	WKIIE
TITLE			IN THIS	CDACE
NAME			SILLI NI	SPACE
STREET ADDRESS		ļ		
CITY-SI-ZIP				
THILE				
NAME			I	J00000711734
STREET ADDRESS				26/07-80018-021 50.00
CITY - ST - ZIF			OTA	TOUGHT OF TOUCH

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:

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

NAME STREET ADDRESS CITY-SI-7IP

239.262-7300

Dete

Daylima Phone #