


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Mar 25, 2005 8:00 am
Secretary of State

03-02-2005 90015 021 ****50.00

DOCUMENT # L04000057888 1. Entity Name RVJ PROPERTIES L.L.C.																																																																																																																																									
Principal Place of Business 4895 HIGGINBOTHAM ROAD FORT MYERS FL 33905 US			Mailing Address 4895 HIGGINBOTHAM ROAD FORT MYERS FL 33905 US																																																																																																																																						
2. Principal Place of Business		3. Mailing Address																																																																																																																																							
Suite, Apt. #, etc.		Suite, Apt. #, etc.																																																																																																																																							
City & State		City & State																																																																																																																																							
Zip	Country	Zip	Country	4. FEI Number 20-1463189																																																																																																																																					
				Applied For <input type="checkbox"/> Not Applicable																																																																																																																																					
				5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required																																																																																																																																					
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent																																																																																																																																						
RICHARDSON, RONALD S 4895 HIGGINBOTHAM ROAD FORT MYERS FL 33905			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>																																																																																																																																						
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 <u><i>Ronald S. Richardson</i></u> DATE <u>2/18/05</u> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering)</small>																																																																																																																																									
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2005																																																																																																																																									
9. MANAGING MEMBERS / MANAGERS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">MGR</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>RICHARDSON, RONALD S</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>4895 HIGGINBOTHAM ROAD</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>FORT MYERS FL 33905</td> <td></td> </tr> </table> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">MGRM</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>RICHARDSON, VIKKI A</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>4895 HIGGINBOTHAM ROAD</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>FORT MYERS FL 33905</td> <td></td> </tr> </table> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">MGRM</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>RICHARDSON, JASON</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>4895 HIGGINBOTHAM ROAD</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>FORT MYERS FL 33905</td> <td></td> </tr> </table> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;"></td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;"></td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;"></td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>			TITLE	MGR	<input type="checkbox"/> Delete	NAME	RICHARDSON, RONALD S		STREET ADDRESS	4895 HIGGINBOTHAM ROAD		CITY-ST-ZIP	FORT MYERS FL 33905		TITLE	MGRM	<input type="checkbox"/> Delete	NAME	RICHARDSON, VIKKI A		STREET ADDRESS	4895 HIGGINBOTHAM ROAD		CITY-ST-ZIP	FORT MYERS FL 33905		TITLE	MGRM	<input type="checkbox"/> Delete	NAME	RICHARDSON, JASON		STREET ADDRESS	4895 HIGGINBOTHAM ROAD		CITY-ST-ZIP	FORT MYERS FL 33905		TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			10. 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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <u><i>Ronald S. Richardson</i></u> DATE: <u>2/18/05</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>																																																																																																																																									