

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000062269

Entity Name: R & S LLC

FILED
Apr 28, 2008
Secretary of State

Current Principal Place of Business:

1514 W 23RD ST
UNIT A
PANAMA CITY, FL 32405

New Principal Place of Business:

2023 THOMAS DRIVE
PANAMA CITY BEACH, FL 32408

Current Mailing Address:

1514 W 23RD ST
PANAMA CITY, FL 32405

New Mailing Address:

2023 THOMAS DRIVE
PANAMA CITY BEACH, FL 32408

FEI Number: 20-1524120

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKINNER, CAMERON F
3511 PLEASANT HILL RD
LYNN HAVEN, FL 32444 US

Name and Address of New Registered Agent:

SKINNER, CAMERON F
2023 THOMAS DRIVE
PANAMA CITY BEACH, FL 32408 US

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:

04/28/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SKINNER, CAMERON F
Address: 3511 PLEASANT HILL RD
City-St-Zip: LYNN HAVEN, FL 32444

Title: MGR () Delete
Name: RUDOLPH, JOSEPH
Address: 8409 N LAGOON DR
City-St-Zip: PANAMA CITY BEACH, FL 32408

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SKINNER, CAMERON F
Address: 2023 THOMAS DRIVE
City-St-Zip: PANAMA CITY BEACH, FL 32408

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: CAMERON SKINNER

MGR

04/28/2008

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