

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

2007 MAY 31 AM 9:27

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



<b>DOCUMENT # L04000072461</b> 1. Entity Name R.D.A. CONSTRUCTION, L.L.C.					
Principal Place of Business 4711 34TH STREET NORTH, UNIT D ST. PETERSBURG, FL 33714			Mailing Address 4711 34TH STREET NORTH, UNIT D ST. PETERSBURG, FL 33714		
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.			
City & State  Zip      Country		City & State  Zip      Country		4. FEI Number 20-1718305	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent  O'CONNOR, PATRICK M ESQ. C/O O'CONNOR & ASSOCIATES 2240 BELLEAIR ROAD, SUITE 160 CLEARWATER, FL 33764			7. Name and Address of New Registered Agent  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 _____ (NOTE: Registered Agent signature required when reinstating)      DATE _____					
<b>Filing Fee is \$50.00 Due by May 1, 2007</b>		<b>Make check payable to Florida Department of State</b>			
<b>9. MANAGING MEMBERS/MANAGERS</b>			<b>10. ADDITIONS/CHANGES</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GAUDINEER, JON 4711 34TH STREET NORTH SUITE D SAINT PETERSBURG, FL 33714		TITLE NAME STREET ADDRESS CITY-ST-ZIP	800103542668 05/31/07--01004--003 **\$50.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MAYHEW, MICHAEL W 4711 84TH STREET NORTH SUITE D SAINT PETERSBURG, FL 33714		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change      Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MARINELLI, FRANK 14126 WHISPERWOOD DRIVE CLEARWATER, FL 33762		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change      Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR OBERDING, JACK 2555 HERON LANE NORTH CLEARWATER, FL 33762		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change      Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change      Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change      Addition	
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.					
<b>SIGNATURE:</b> _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>			Date      Daytime Phone #		