

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Mar 17, 2008 8:00 am**  
**Secretary of State**

03-17-2008 90258 047 \*\*\*138.75

<b>DOCUMENT # L04000073996</b> 1. Entity Name <b>RDC JUPITER SOUND, LLC.</b>					
Principal Place of Business <b>1015 W INDIANTOWN RD SUITE 101A JUPITER, FL 33458 US</b>			Mailing Address <b>1015 W INDIANTOWN RD SUITE 101A JUPITER, FL 33458 US</b>		
2. Principal Place of Business - No P.O. Box # <b>935 Town Hall Ave</b>		3. Mailing Address <b>935 Town Hall Ave</b>			
Suite, Apt. #, etc. <b>#2</b>		Suite, Apt. #, etc. <b>#2</b>			
City & State <b>Jupiter, FL</b>		City & State <b>Jupiter, FL</b>			
Zip <b>33458</b>		Country <b>US</b>		Zip <b>33458</b>	
Country <b>US</b>		4. FEI Number <b>20-1736368</b>			
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$5.00</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>THOMAS, DANNY R 18329 SE FEDERAL HWY JUPITER, FL 33469</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </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 <small>Signature, typed or printed name of registered agent and title if applicable.</small>			DATE <b>3/5/08</b> <small>(NOTE: Registered Agent signature required when reinstating)</small>		
<b>FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75</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	<b>MGR THOMAS, DANNY R 18329 SE FEDERAL HIGHWAY JUPITER, FL 33469</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM KIDWELL, GEORGE R 18824 SE JUPITER RIVER DRIVE JUPITER, FL 33458</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
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 <b>3/5/08</b>				Daytime Phone # <b>386-745-9307</b>	