

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000080644

Entity Name: R & C ENTERPRISES, LLC

FILED
Jan 08, 2007
Secretary of State

Current Principal Place of Business:

706 HIDDEN LAKE DRIVE
BRANDON, FL 33511 US

New Principal Place of Business:

5659 PINE ST
SEFFNER, FL 33584 US

Current Mailing Address:

706 HIDDEN LAKE DRIVE
BRANDON, FL 33511 US

New Mailing Address:

4022 QUAIL BRIAR DR.
VALRICO, FL 33594 US

FEI Number: 86-1120532

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LONGSTRETH, RICK L
706 HIDDEN LAKE DRIVE
BRANDON, FL 33511 US

Name and Address of New Registered Agent:

SANDS, CHAD E
4022 QUAIL BRIAR DR.
VALRICO, FL 33594 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: CHAD EDWARD SANDS

01/08/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: LONGSTRETH, RICK L
Address: 706 HIDDEN LAKE DRIVE
City-St-Zip: BRANDON, FL 33511

Title: MGR () Delete
Name: SANDS, CHAD E
Address: 301 S. KINGSWAY AVE
City-St-Zip: SEFFNER, FL 33584

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SANDS, CHAD E
Address: 4022 QUAIL BRIAR DR.
City-St-Zip: VALRICO, FL 33594

Title: MGRM (X) Change () Addition
Name: KENDRICK, KASEY
Address: 4022 QUAIL BRIAR DR.
City-St-Zip: VALRICO, FL 33594

I hereby certify that the information supplied with this filing does not qualify for the 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: CHAD SANDS

MGR

01/08/2007

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