

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 24, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # L04000081330

1. Entity Name  
RAP PROPERTY MANAGEMENT, LLC



Principal Place of Business  
806 RIVERSIDE AVENUE  
JACKSONVILLE, FL 32203

Mailing Address  
PO BOX 2286  
JACKSONVILLE, FL 32203



04192006 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
76-0774931

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fees Required

6. Name and Address of Current Registered Agent

LUNETTA, PAUL  
806 RIVERSIDE AVENUE  
JACKSONVILLE, FL 32203

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IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00  
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE	CEO
NAME	HARDEN, III, MARVIN C.
STREET ADDRESS	806 RIVERSIDE AVENUE
CITY-ST-ZIP	JACKSONVILLE, FL 32203
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

05/05/06-80108-021 50.00

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IN THIS SPACE**

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/19/06 (904)354-3785

File

Daytime Phone #