

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 27, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000091807

1. Entity Name
RMBB ENTERPRISES OF LAKE COUNTY, LLC



Principal Place of Business
**308 EAST FIFTH AVENUE
MOUNT DORA, FL 23757**

Mailing Address
**308 EAST FIFTH AVENUE
MOUNT DORA, FL 23757**



01032006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-2084964

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**DUNCAN, BRUCE G
308 EAST FIFTH AVENUE
MOUNT DORA, FL 23757**

**DO NOT WRITE
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
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
DUNCAN, BRUCE G
308 EAST FIFTH AVENUE
MOUNT DORA, FL 23757**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
SICHKO, CHARLES R
33823 STETSON LANE
LEESBURG, FL 34788**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
SICHKO, MERRI LENIER
33823 STETSON LANE
LEESBURG, FL 34788**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
BATTILLO, WILLIAM
818 CLAYTON STREET
ORLANDO, FL 32804**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
SLEAFORD, MICHAEL
2218 DOGWOOD CIRCLE
MOUNT DORA, FL 32757**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1031000447061
03/08/06-80064-021 50.00

**DO NOT WRITE
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 605, Florida Statutes.

SIGNATURE:

Bruce G. Duncan

Bruce G. Duncan 1/4/06 352.383.4186

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

Date

Daytime Phone #