


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 13, 2007 08:00 AM
Secretary of State

DOCUMENT # L04000093481 1. Entity Name R & L PROPERTIES OF BAY CO LLC	
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Principal Place of Business PO BOX 482 LYNN HAVEN, FL 32444	Mailing Address PO BOX 482 LYNN HAVEN, FL 32444
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DO NOT WRITE IN THIS SPACE



01162007No Chg-LLC

CR2E083 (11/05)

4. FEI Number 28-2058439	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**LIESEMYER, HERMAN T
2605 N BONITA AVENUE
PANAMA CITY, FL 32401**

**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 *Herman T. Liesemyer* *Herman T. Liesemyer* 3-4-07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning) DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR LIESEMYER, HERMAN T PO BOX 482 LYNN HAVEN, FL 32444
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR REYNOLDS, JEFFERY PO BOX 482 LYNN HAVEN, FL 32444
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03/23/07-80007-025 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 606, Florida Statutes.

SIGNATURE: *Herman T. Liesemyer* *Herman T. Liesemyer* 3-4-07 850-785-8191
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #