2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jan 13, 2006 8:00 am Secretary of State

ANNUAL REPORT						Secretary of State			
DOCUMENT # L05000018777 1. Entity Name R & B CONDO PROPERTIES, LLC						13-2006 9003			
Principal Place of Business		Mailing Address					 .		
2600 OVERLOOK DRIVE WINTER HAVEN, FL 33883		P.O. BOX 747 Winter Haven, FL 33883			60001353				
					1 18811811 B11				
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01092006	Chg-LLC	CR2E08	83 (11/05)	
City & State		City & State			4. FEI Numbe	407645		Applied For Not Applicable	
Zip	Country	Zip	Country		•	of Status Desired	n 9	\$5.00 Additional Fee Required	
Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent					
CLINE, DEBRAL, 141 5TH STREET WINTER HAVEN, FI	33883				?.O. Box Numbe	er is Not Acceptable	FL.	Zip Code	
the obligations of regis		or the purpose of changing it	13 registered off			h, in the State of Flo		amiliar with, and accept	
Filing Fee is \$50.00 Due by May 1, 2006							e check pe Departme	eyable to ant of State	
9.	MANAGING MEMBI	RS/MANAGERS	10.	····		ADDITIONS/	CHANGES		

9.	MANAGING MEMBERS/MANAGERS	10. ADDITIONS/CHANGES						
TITLE NAME STREET ACCRESS CITY-ST-ZIP	□ Delete	NAME STREET ADDRESS CITY-ST-ZIP	MGRM Change PARRITION PAYMEND O. SENTLEY SR. 260C OVER LOOK Dr. 33884					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition					
TITLE NAME STREET ACCRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ACCRESS CITY-ST-ZIP	☐ Change ☐ Addition					
TITLE NAME STREET ACCRESS CITY-ST-ZIP	□ Dekete	TITLE NAME STREET ACCRESS CITY - ST - ZIP	☐ Change ☐ Addition					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ACCRESS CITY-ST-ZIP	☐ Change ☐ Addition					
TITLE NAME STREET ADDRESS CUTY, ST. 709	☐ Defete	TITLE NAME STREET ACCRESS	Ctange Addition					

11. I hereby certify that the information supplied with this fitting does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I turther certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as it 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: Kaymond C. Butter RAYMOND O. BENTLEY For MORM