## 2007 LIMITED LIABILITY COMPANY

## ANNUAL REPORT FILED DOCUMENT # L05000028381 1. Entity Name RP PROPERTIES, LLC 07 APR 25 AM 8: 01 BECKETARY OF STATE Principal Place of Business Mailing Address TALLAHASSEE, FLORIDA 4515 HIGHGROVE PLACE 4515 HIGHGROVE PLACE TALLAHASSEE, FL 32309 TALLAHASSEE, FL 32309 · . · . 03162007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-2759559 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MANAUSA, DANIEL E DO NOT WRITE 3520 THOMASVILLE ROAD, 4TH FLOOR TALLAHASSEE, FL 32309 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 Fiorida. 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) Filing Fee is \$50.00 Due by May 1, 2007 MANAGING MEMBERS/MANAGERS 9. **MGRM** TITLE NAME POURJAHAN, RAZIEH STREET ADDRESS 4515 HIGHGROVE PLACE CITY-ST-ZIP TALLAHASSEE, FL 32309 TITLE NAME STREET ADDRESS 600101623726 05/04/07--01059--007 \*\*\*5 CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP .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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE