## 2008 LIMITED LIABILITY COMPANY

_`	ANNUAL	REPORT		
DOCUMENT # L05000028381  1. Entity Name RP PROPERTIES, LLC				O8 APR -4 AM 8: 16
4515 HIGHGROVE PLACE 4515		Mailing Address 4515 HIGHGROVE PLACE TALLAHASSEE, FL 32309		TALLAHASSEE. FLORIDA
DO NOT WRITE IN THIS SPACE				02122008 No Chg-LLC CR2E083 (12/07)  4. FEI Number Applied For Not Applied ble
	6. Name and Address of Current R A, DANIEL E MASVILLE ROAD, 4TH FLOOR	-		5. Certificate of Status Desired
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 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  FILE NOW!!! FEE IS \$138.75  After May 1, 2008 Fee will be \$538.75				
9.	MANAGING MEMBER	S/MANAGERS		<del></del>
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM POURJAHAN, RAZIEH 4515 HIGHGROVE PLACE TALLAHASSEE, FL 32309	O/MAIS/OLENS		700122272487 
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME				DO NOT WRITE IN THIS SPACE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		7		
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 trusfee 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 · 2 · 08 850 · 205 - 5231

Date Daytime Phone #