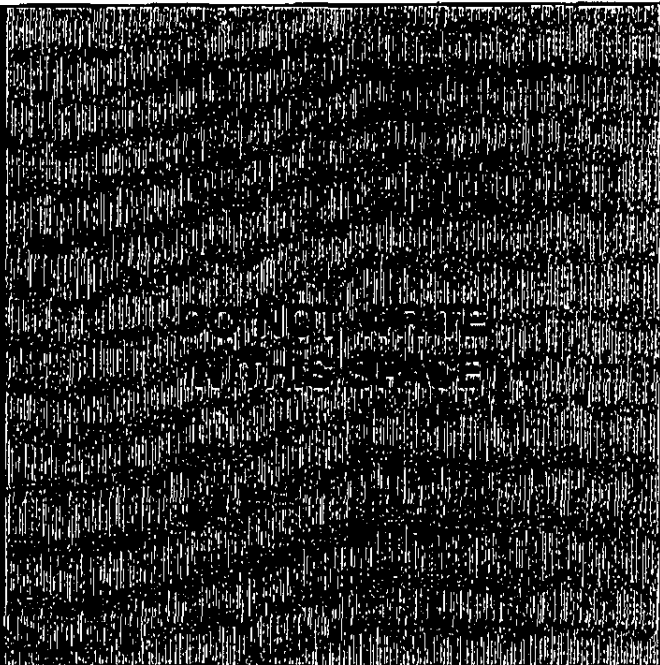


FILED

May 02, 2008 08:00 AM
Secretary of State2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L05000078561		
1. Entity Name R & I AT LAUREL MANOR, LLC		
Principal Place of Business 8301 C.R. 44 LEESBURG, FL 34748		Mailing Address 8301 C.R. 44 LEESBURG, FL 34748
		
04292006 No Chg-LLC CR2E083 (12/07)		
4. FEI Number 20-3335891		Applied For Not Applicable
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required
6. Name and Address of Current Registered Agent ROZENSKY, RICHARD W 8792 SE 165 MULBERRY LANE THE VILLAGES, FL 32162		
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 _____ DATE 05/29/08 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when transferring)		
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ROZENSKY, RICHARD W 8792 SE 165 MULBERRY LN THE VILLAGES, FL 32162	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ILKKA, DON J 8301 CR 44 LEESBURG, FL 34748	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNED MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE		4/30/08 352-753-0784 Date Daytime Phone