

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000087600

Entity Name: R & R KULAS, LLC

**FILED**  
**Feb 08, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

235 SW FERNLEAF TRAIL  
PORT ST. LUCIE, FL 34953

**New Principal Place of Business:**

**Current Mailing Address:**

235 SW FERNLEAF TRAIL  
PORT ST. LUCIE, FL 34953

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KULAS, ROBERT J  
2100 SE HILLMOOR DRIVE, STE. 105  
PORT ST. LUCIE, FL 34952 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: KULAS, ROBERTA  
Address: 235 SW FERNLEAF TRAIL  
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: MGRM  
Name: KULAS, ROBERT J  
Address: 235 SW FERNLEAF TRAIL  
City-St-Zip: PORT ST. LUCIE, FL 34953

I hereby certify that the information indicated on this report is true and accurate and that my electronic 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: ROBERT J KULAS

MGRM

02/08/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date