

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 30, 2007 08:00 A**  
**Secretary of State**

**DOCUMENT # L05000110491**

1. Entity Name  
**RC AIRPORT PROPERTIES, LLC**



Principal Place of Business  
**1041 CROWN PRK CIR  
WINTER GARDEN, FL 34787**

Mailing Address  
**1041 CROWN PRK CIR  
WINTER GARDEN, FL 34787**



04262007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**20-3840220**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**KELLEY, GOLDBERG, LEACH & COHN PL  
475 MONTGOMERY PLACE  
ALTAMONTE SPRINGS, FL 32714**

**DO NOT WRITE  
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 \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2007**

**9. MANAGING MEMBERS/MANAGERS**

|                                                    |                                                                    |
|----------------------------------------------------|--------------------------------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | MGR<br>RABOUD, RONALD J<br>4405 W KELLY PRK RD<br>APOPKA, FL 32712 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | MGR<br>COX, LAWRENCE G<br>1099 PRK AVE N<br>WINTER PARK, FL 32789  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |                                                                    |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |                                                                    |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |                                                                    |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |                                                                    |

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05/15/07-80111-011 50.00

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IN THIS SPACE**

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 SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

*Ronald J. Raboud* 4/27/07 (407) 222-0220