

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR).- DUE BY MAY 1, 2008

FILED
Mar 05, 2008 08:00 A
Secretary of State

DOCUMENT # L06000064099

1. Entity Name

RDC MANAGEMENT LLC



Principal Place of Business

8365 SHIPTON STREET
NAVARRE FL 32566

Mailing Address

8365 SHIPTON STREET
NAVARRE FL 32566



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E083 (10/07)

4. FEI Number **03-0597880**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RACHEL, CLARK D
8365 SHIPTON STREET
NAVARRE FL 32566

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Rachel Clark President

3/1/08

Signature, typed or printed name of registered agent and the filer, if applicable (NOTE: Registered Agent's signature required when registering)

DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008, Fee Will Be \$538.75
Make Check Payable to Florida Department of State

9. MANAGING MEMBERS / MANAGERS

10. ADDITIONS / CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PRES
CLARK, RACHEL D
8365 SHIPTON STREET
NAVARRE FL 32566 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition
L000000848319
03/20/08-80013-003 138.75

TITLE
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DANIEL, CLARK
8365 SHIPTON STREET
NAVARRE FL 32566 ☐ Delete

TITLE
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☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Rachel Clark President

3/1/08

850420-7149

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Designation