## FILED Jun 08, 2007 8:00 am Secretary of State 04-20-2007 90029 046 \*\*\*\*50.00

## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000089892  1. Entity Name RF 98 PROPERTIES, LLC							1010290	30.00
Principal Place 100 JOHN KII CRESTVIEW, I	NG ROAD	Mailing Address 100 JOHN KING ROAD CRESTVIEW, FL 32539						2251 F1 1201
2. Principal Pl	ace of Business - No P.O. Box #	3. Mailing Address						
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			04112007	Chg-LLC	CR2E083 (12/06)	
City & State		City & State		<del></del>	4. FEI Numbe			plied For
Žip	Country Z <sub>I</sub> p		Country			of Status Desired	S5.00 Add	
	6. Name and Address of Current	legistered Agent Name			7. Name and	Address of New F	Registered Agent	
	Rogelio King Road W, Fl. 32539	Street Address		(P.O. Box Number is Not Acceptable)				
				City		<del> </del>	FL Zip Cod	e
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 a the obligations of registered agent.								and accept
SIGNATURE Segreture, hyped or (critical report of registered approximation of Control report of the Property o								
Filing Fee is \$50.00 Due by May 1, 2007							te check payable to a Department of Stat	•
9.	MANAGING MEMB	ERS/MANAGERS	10.		l	ADDITIONS	/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CHAVEZ, ROGELIO 100 JOHN KING ROAD CRESTVIEW, FL 32539	☐ Deista		- I			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CHAVEZ, FERNANDO 100 JOHN KING ROAD CRESTVIEW, FL 32539	☐ Delete					☐ Change	Addition .
HILE NAME SIREET ADDRESS CITY-S1-ZP	OKES1 VIEW, V.C. 32333	☐ Delate	IIIL Nav Stri	<u> </u>			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITL NAM STRI	E			Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete					☐ Change	Addition
TITLE MAME STREET ADDRESS CITY-ST-ZIP		□ Delets		l l			☐ Change	Addition
11. I heroby 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 it 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: 5-31-07 850 685 693 GENERAL MANAGER ON AUTHORIZED REPRESENTATIVE DAM DAYS DEPTRO PROTECT								