

# **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000121202

**FILED**  
**Feb 18, 2007**  
**Secretary of State**

**Entity Name:** RLCL, LLC

**Current Principal Place of Business:**

630 US HWY 17-92 W.  
HAINES CITY, FL 33845

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1481  
HAINES CITY, FL 33845

**New Mailing Address:**

PO BOX 1481  
HAINES CITY, FL 33845

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BUSH, GEORGE TRENEN  
205 AVE K SE  
WINTER HAVEN, FL 33880 US

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

LITTLE, ROBERT A  
630 US HWY 17-92 W.  
HAINES CITY, FL 33845 US

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: ROBERT A LITTLE

02/18/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: LITTLE, ROBERT A  
Address: PO BOX 1481  
City-St-Zip: HAINES CITY, FL 33845

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 A LITTLE

MGR

02/18/2007

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