

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**Aug 15, 2008 8:00 am
Secretary of State**

07-22-2008 90026 040 ***138.75

DOCUMENT # L07000081871	
1. Entity Name R & D OPEN HOLDINGS, LLC	

Principal Place of Business 3010 WINDMILL RANCH ROAD FORT LAUDERDALE, FL 33331	Mailing Address 3010 WINDMILL RANCH ROAD FORT LAUDERDALE, FL 33331
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00010901



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

07082008 Chg-LLC CR2C083 (12/06)

4. FBI Number 26-3159694	Applied for Not Applied
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5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent SOPHER, ROBERT 3010 WINDMILL RANCH ROAD FORT LAUDERDALE, FL 33331
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7. Name and Address of New Registered Agent	
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 _____
Signature, typed or printed name of registered agent and title if applicable. (UNTIL: Registered Agent signature required when reappointing.) DATE _____

**FILE NOW!!! FEE IS \$138.75
Due by September 12, 2008**

In accordance with s. 807.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Make check payable to:
Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONAL CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☒ Add
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Add
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Add
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Add
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Add
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Add

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: Robert W. Sopher 7/18/08 305-652-2653
SIGNATURE AND TYPED OR PRINTED NAME OF CURRENT MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

Message Confirmation Report

ATTACHMENT

30010901

MAR-22-19:0 07:43 PM TUE

Fax Number : 19543891034

Name : RWS

Name/Number : 13056537942
 Page : 1
 Start Time : MAR-22-19:0 07:42PM TUE
 Elapsed Time : 00'12"
 Mode : STD ECM
 Results : [O.K]

STATEMENT



WESTON HILLS COUNTRY CLUB
 2600 COUNTRY CLUB WAY
 WESTON, FLORIDA 33332
 www.westonhillsgolfclub.com

TOTAL DUE

592.83

AMOUNT ENCLOSED \$

STATEMENT DATE
 07/31/2008

ACCOUNT NUMBER
 67892

TO: Robert Sopher
 3010 Windmill Ranch Rd.
 Weston, FL 33331

20067892

PLEASE DETACH HERE AND RETURN THIS PORTION WITH YOUR PAYMENT

PLEASE MAKE CHECK PAYABLE TO WESTON HILLS COUNTRY CLUB

DATE	REFERENCE	DESCRIPTION	DEBIT	CREDIT	TOTAL DUE
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07/01/2008		Beginning Balance	592.83		
07/11/2008	0057258	Payment 13050		592.83	
07/17/2008	0026875	Weston Hills Platinum Dues	592.83		

Visit the Grille Room and utilize
 your food minimum requirement

paid food minimum: 340.00



WESTON HILLS COUNTRY CLUB
 MEMBER SERVICES
 PHONE (854) 384-1660
 www.westonhillsgolfclub.com

BALANCE IS DUE AND PAYABLE UPON RECEIPT.
 PAYMENT MUST BE RECEIVED IN FULL AT THE
 CLUB BY LAST DAY OF THE MONTH TO
 AVOID LATE CHARGES.

TOTAL DUE
 592.83