2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 16, 2008 8:00 am
Secretary of State
03-24-2008 90241 019 ***138.75

DOCUMENT # L99000001091

1. Entity Name
F & R PROPERTIES, LC

Principal Place of Business	Mailing Address
514 SW 2ND AVE OCALA, FL 34474	514 SW 2ND AVE OCALA, FL 34474

DO NOT WRITE IN THIS SPACE

01092008 No Chg-LLC CR2E083 (12/07)

4. FEI Number
59-3568760
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

DULIN, RACHEL Z
514 SW 2ND AVE
OCALA, FL 34474

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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 Dulin 4-14-08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	DULIN, RACHEL Z
STREET ADDRESS	514 SW 2ND AVE
CITY-ST-ZIP	OCALA, FL 34474
TITLE	MGRM
NAME	DULIN, FREDERIC
STREET ADDRESS	514 SW 2ND AVE
CITY-ST-ZIP	OCALA, FL 34474
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: ✓ Rachel Dulin 4-14-08 352-732-2660
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #