

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 27, 2006 8:00 am**  
**Secretary of State**

03-27-2006 90048 010 \*\*\*\*50.00

**DOCUMENT # M94000000022**

1. Entity Name  
RDT, L.L.C., L.C.



Principal Place of Business  
275 CLYDE MORRIS BLVD.  
ORMOND BEACH, FL 32174

Mailing Address  
275 CLYDE MORRIS BLVD.  
ORMOND BEACH, FL 32174

**20020866**



02082006No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-3158032

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

VOGES, WILLIAM J  
275 CLYDE MORRIS BLVD.  
ORMOND BEACH, FL 32174

**DO NOT WRITE  
IN THIS SPACE**

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.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2006**

**9. MANAGING MEMBERS/MANAGERS**

TITLE MGR  
NAME VOGES, WILLIAM J  
STREET ADDRESS 275 CLYDE MORRIS BLVD.  
CITY-ST-ZIP ORMOND BEACH, FL 32174

TITLE MGR  
NAME MARONEY, PHILIP  
STREET ADDRESS 275 CLYDE MORRIS BLVD.  
CITY-ST-ZIP ORMOND BEACH, FL 32174

TITLE MGR  
NAME DITTBENNER, EILEEN  
STREET ADDRESS 275 CLYDE MORRIS BLVD.  
CITY-ST-ZIP ORMOND BEACH, FL 32174

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

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:** \_\_\_\_\_

William J. Voges, Manager 3/30/2006 386-671-4908

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

Date

Daytime Phone #



ATTACHMENT

20020866

#M940000000022

275 Clyde Morris Boulevard  
Ormond Beach, Florida 32174  
Tel 386 671 4888  
Fax 386 671 3888

March 30, 2006

Via Certified Mail, Return Receipt Requested  
7000 0600 0028 1779 3468

Department of State  
P. O. box 6478  
Tallahassee, FL 32301

Re; 2006 Limited Liability Company Annual Reports

Dear Sir or Madam:

Enclosed please find the annual reports and \$50.00 fees incident to the following limited liability companies.

DMV Investments, LLC  
Petalio II, LLC  
Pump House East, LLC  
RDT, L.L.C., L.C.  
Root Mortgage III, LLC  
Root Venture Partners, LLC  
Root Wilmette Investments, LLC  
Silver Holly Development, LLC  
SSRF Properties, LLC

Also enclosed are the annual reports and fees of \$61.25 each for the following Not-for-Profit Corporations:

Block F OACC fire System Owners Assoc.  
Pines Property Owner's Association

Please proceed to file these annual reports. If you have any questions or require additional information I will appreciate a call to 386-671-4908.

Thanking you for all courtesies and cooperation, I am,

Sincerely yours,

Sharon Romano  
Legal Secretary

/shr  
Enc.