

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

DOCUMENT # P03000038478

1. Entity Name  
RHB MANAGEMENT, INC.



**FILED  
Feb 21, 2006 8:00 am  
Secretary of State**

02-21-2006 90018 042 \*\*\*150.00

Principal Place of Business  
23350 CARAWAY LAKES DRIVE  
BONITA SPRINGS, FL 34135

Mailing Address  
23350 CARAWAY LAKES DRIVE  
BONITA SPRINGS, FL 34135



**DO NOT WRITE IN THIS SPACE**

02032006 No Chg-P CR2E034 (11/05)

4. FEI Number <b>55-0827032</b>	Applied For <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	
\$8.75 Additional Fee Required	

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324

**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

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution.  **\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE DP  
NAME BILODEAU, ROGER  
STREET ADDRESS 23350 CARAWAY LAKES DRIVE  
CITY-ST-ZIP BONITA SPRINGS, FL 34135

TITLE DT  
NAME BILODEAU, HELEN  
STREET ADDRESS 23350 CARAWAY LAKES DRIVE  
CITY-ST-ZIP BONITA SPRINGS, FL 34135

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Roger Bilodeau* Roger Bilodeau 02/08/06 239-949-1434  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT *60020333*

*#P 03000038478*

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February 15, 2006

**VIA CERTIFIED MAIL**  
**RETURN RECEIPT REQUESTED**  
**(7004 0750 0003 0113 2717)**

Florida Department of State  
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

**RE: 2006 Annual Report - RHB Management, Inc.**

Dear Sir/Madam:

Enclosed please find the completed 2006 For Profit Corporation Annual Report for RHB Management, Inc., together with a check in the amount of \$150.00 to cover the filing fee.

Thank you for your attention to this matter. Kindly contact me if you have any questions.

Very truly yours,



Linda D. Robitaille  
Paralegal

LDR/ldr  
Enclosures  
cc: Roger Bilodeau