## **~2008 LIMITED LIABILITY COMPANY** ANNUAL REPORT

## **FILED** Feb 28, 2008 08:00 AM Secretary of State **DOCUMENT # L06000093968** SILVER RIDGE INVESTMENTS LLC Principal Place of Business Mailing Address 6833 NE 35 LÂNE 6833 NE 35 LANÉ SILVER SPRINGS, FL 34488 US SILVER SPRINGS, FL 34488 A STATE OF THE STATE OF THE STATE OF 02272008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-5639867 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ABEGGLEN, MARY ANN DO NOT WRITE 6833 NE 35 LANE SILVER SPRINGS, FL 34488 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. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOWILL FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75. MANAGING MEMBERS/MANAGERS TITLE NAME ABEGGLEN, MARY ANN 6833 NE 35 LANE STREET ADDRESS CITY-ST-ZIP SILVER SPRINGS, FL 34488 U00000843093 TITLE 03/11/08-80057-004 138.75 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP

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.