2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 26, 2004 8:00 am Secretary of State 04-09-2004 90213 036 ****50.00

| DOCUMENT # L0300000246 1. Entity Name RIDGE ROAD PROPERTIES, LLC | | | | | l: | | | | | |
|--|-------------------------------------|---|---|--------------|---|--|-------------------------------|-------------|-----------------------|--|
| Principal Place of Business 7822 FRANCINE COURT NEW PORT RICHEY, FL 34653 | | Mailing Address 7822 FRANCINE COURT NEW PORT RICHEY, FL 34653 | | | 34004227 | | | | | |
| 2. Principal Place of Business | | 3. Mailing Address | | | | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | 02172004 | Chg-LLC | CR2E083 (1 | 0/03) | | |
| City & State | | City & State | | | 4. FEI Numb | or 04-3732142 | | Not / | ied For Applicable | |
| Zip | Country me and Address of Current I | Zip | Country | | | of Status Desired | Feaf | 00 Addition | onal | |
| B. Na | Hegistered Agent | . Name | | | Name and Address of New Registered Agent | | | | | |
| PATEL SANDIP I | FSO = | <u>-</u> · · | rvame | | | the second secon | | | | |
| 3105 WATERS AV | | | Street Address (P.0 | | | P.O. Box Number Is Not Acceptable) | | | | |
| TAMPA, FL 3361 | 4 | | City | | | · · · · · · · · · · · · · · · · · · · | FL ² | ip Code | | |
| 9. The shows remade | atibu audumila dhia utatama difa | ette europe et et europe in | | | | | | 715 | | |
| 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 algorithms required when reinstating) DATE | | | | | | | | | | |
| Filing Fee is \$50.00 Due by May 1, 2004 | | | | | | | e check payab Department o | | | |
| 9. | MANAGING MEMBE | | 10, | 1 1/2 | | ADDITIONS/ | | | | |
| TITLE | | ☐ Delete | TITLE | Mgr. | nael D. Stev | | | Change | Addition | |
| NAME STREET ADDRESS | | | NAME MICHAEL D. STREET ADDRESS 7822 Francin | | | | | | ļ | |
| CITY-ST-ZP | | | | | | ey, FL 34653-11 | 100 | | · · | |
| TITLE | | () Deleta | TITLE | Mgr | | | | Change | Addition | |
| NAME | | | | Lyni | Lynn D. Stewart | | | | | |
| STREET ADDRESS | | | | 1 | 7822 Francine Drive | | | | | |
| CITY-ST-ZIF | | | CITY-ST-2IF | 1101 | | y, FL 34653-11 | | | | |
| TITLE NAME | Delete TITLE | | | | Mgc | Discussed TDF | | Change | X Addition | |
| STREET ADDRESS | | | | | L.D. & Juanita Stewart TBE 7822 Francine Drive | | | | | |
| CITY-ST-ZIP | | _ | CITY-ST-ZIF | 1 102 | | ov. FL 34653-1 | 100 | | Ì | |
| -trus | | | nitre | | | | | Change | nollibbA | |
| NAME STREET ADDRESS | • | | NAME STREET AGO | | | | | | | |
| CITY-ST-ZIP | | | STREET ADD | | | | | | | |
| TITLE | | ☐ Delete | TITLE | | | | | Change | Addition | |
| NAME | | | NAME | İ | | | _ | - | _ | |
| STREET ADDRESS CITY-ST-ZIP | | | STREET ADD | f | | | | | | |
| IMLE | - | ☐ Delete | TITLE | | | | | Change | ☐ Addie | |
| NAME | | FT DSKIB | NAME | | | | LJ. | rusuõa. | ☐ Addition | |
| STREET ADDRESS | | | STREET ADD | RESS | | | | | | |
| CITY-ST-ZIP | | | CITY-ST-ZI | | | | | | | |
| 11. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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: Michael Stewart 4/1/04 727-848-4047 | | | | | | | | | | |
| BIGHATU | RE AND TYPED OR PRINTED NAME O | F BIONING MANAGING MEMBER, MA | MAGER, OR AUTH | ORGED REPRES | ENTATIVE | Date | Ouytime | Phone # | | |