#### 2021 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

#### DOCUMENT# L07000119030

Entity Name: ANCHOR RIDGE MANAGEMENT, LLC

# **Current Principal Place of Business:**

200 N. FRANKLIN STREET **SUITE 3300** TAMPA, FL 33602

## **Current Mailing Address:**

BRUCE LAUER C/O CUSHMAN WAKEFIELD 200 N. FRANKLIN STREET SUITE 3300 TAMPA, FL 33602 US

## FEI Number: 27-0919864

### Name and Address of Current Registered Agent:

HENDEE, MCKERNAN, SCHROEDER, WILKERSON & HENDEE, PA 1700 SOUTH MACDILL AVENUE, STE 200 TAMPA, FL 33629 US

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.

SIGNATU	RE: MATTHEW R SCHROEDER			05/20/2021	
	Electronic Signature of Registered Agent			Date	
Authorized Person(s) Detail :					
Title	MGR	Title	PRESIDENT		
Name	LAUER, BRUCE	Name	CAPPUCCILLI, JOSEPH G		
Address	200 N. FRANKLIN STREET	Address	PO BOX 2050		

		SUITE 3300	City-State-Zip:	LECANTO FL 34460
	City-State-Zip:	TAMPA FL 33602		
<b>—</b>	<b>T</b> '44	VP, SECRETARY	Title	TREASURER
	Title		Name	RIEGLER, G. MICHAEL
	Name	TAYLOR, MARINA C	Address	PO BOX 2050
	Address	PO BOX 2050		
	City-State-Zip:	LECANTO FL 34460		LECANTO FL 34460

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARINA C TAYLOR

VP/SEC

05/20/2021

Electronic Signature of Signing Authorized Person(s) Detail

# FILED May 20, 2021 Secretary of State 7680510465CC

Certificate of Status Desired: No

Date