

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000034560

Entity Name: RIDGEDALE LLC**Current Principal Place of Business:**21 TULANE DRIVE
AVON PARK, FL 33825**Current Mailing Address:**P. O. BOX 1327
AVON PARK, FL 33826 13**FEI Number:** 26-3207923**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**SHOEMAN, LARRY P
21 TULANE DRIVE
AVON PARK, FL 33825 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.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Authorized Person(s) Detail :**

Title CHAIRMAN
Name WADE, GREG
Address 516 W. CIRCLE ST.
City-State-Zip: AVON PARK FL 33825

Title D
Name HARRIS, APRIL
Address 140 S. COMMERCE AVE
City-State-Zip: SEBRING FL 33870

Title VPD
Name VINSON, DONNA
Address 800 W. MAIN STREET
City-State-Zip: AVON PARK FL 33825

Title VC
Name ROBERTS, LESTER
Address 1002 S. WALDRON AVE.
City-State-Zip: AVON PARK FL 33825

Title D
Name BARNARD, CAMERON
Address 2115 N. OLIVIA DRIVE
City-State-Zip: AVON PARK FL 33825

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LESTER A. ROBERTS

VICE CHAIRMAN

01/08/2013

Electronic Signature of Signing Authorized Person(s) Detail_____
Date