

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000135039

**Entity Name:** RUBY RICH, L.L.C.

**Current Principal Place of Business:**

11512 LAKE MEAD AVE., SUITE 531  
JACKSONVILLE, FL 32256

**Current Mailing Address:**

11512 LAKE MEAD AVE., SUITE 531  
JACKSONVILLE, FL 32256

**FEI Number:** 45-4298958

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GILL, HUBERT W  
1751 UNIVERSITY BLVD SOUTH  
JACKSONVILLE, FL 32216 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 MGR  
Name GREENE, CHARLES  
Address 4519 GLEN KERNAN PRK WY E  
City-State-Zip: JACKSONVILLE FL 32224

Title MGR  
Name HERBERT, ADAM  
Address 4544 GLEN KERNAN PRK WY E  
City-State-Zip: JACKSONVILLE FL 32224

Title MGR  
Name GILL, HUBERT W  
Address 1751 UNIVERSITY BLVD SOUTH  
City-State-Zip: JACKSONVILLE FL 32216

*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:** HUBERT W GILL, CPA

**REGISTERED AGENT**

**04/16/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date