## SIGNATURE: PETER ALUOTTO

Electronic Signature of Signing Authorized Person(s) Detail

# DOCUMENT# L13000143841

Entity Name: NORTHRIDGE HOUSING LLC

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### **Current Principal Place of Business:**

3911 NORTHRIDGE DR VALRICO, FL 33596

#### **Current Mailing Address:**

3911 NORTHRIDGE DR VALRICO, FL 33596

### FEI Number: 46-3990551

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

ALUOTTO, ELENA 3911 NORTHRIDGE DR VALRICO, FL 33596 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

#### Authorized Person(s) Detail :

Title	MGRM	Title	MGRM
Name	ALUOTTO, ELENA	Name	ALUOTTO, PETER
Address	3911 NORTHRIDGE DR	Address	2009 ST THOMAS DR #226
City-State-Zip:	VALRICO FL 33596	City-State-Zip:	WALDORF MD 20602

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. 02/18/2014

MANAGING MEMBER

Date

FILED Feb 18, 2014 Secretary of State CC6357348102

Certificate of Status Desired: No

Date