2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 292232

FILED Feb 23, 2005 Secretary of State

Entity Name: RIDGE SEMINOLE MANAGEMENT CORPORATION

Current Principal Place of Business: New Principal Place of Business:

8275-113TH ST. N. SEMINOLE, FL 33772

Current Mailing Address: New Mailing Address:

8275-113TH ST. N. SEMINOLE, FL 33772

FEI Number: 59-1101514 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CASTLES, LORENA P.

8330 112TH ST N

SEMINOLE, FL 33772 US

TAYLOR, J. ERIC

101 E. KENNEDY BOULEVARD

SUITE 2700

TAMPA, FL 33602 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: J. ERIC TAYLOR 02/23/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPVS () Delete Title: DPTS (X) Change () Addition

 Name:
 PEACOCK, TOMMAY,
 Name:
 PEACOCK, TOMMAY T

 Address:
 8330 112 ST N
 Address:
 8330 112 ST N

City-St-Zip: SEMINOLE, FL 33772 US City-St-Zip: SEMINOLE, FL 33772 US

Title: ASD () Delete Title: AS (X) Change () Addition

 Name:
 CASTLES, LORENA,
 Name:
 CASTLES, LORENA

 Address:
 8330 112 ST N
 Address:
 8330 112 ST N

City-St-Zip: SEMINOLE, FL 33772 US City-St-Zip: SEMINOLE, FL 33772 US

Name: CASTLES, SANDRA M Name: CASTLES, SANDRA M

Address: 8330 112 ST N Address: 8330 112 ST N

City-St-Zip: SEMINOLE, FL 33772 US City-St-Zip: SEMINOLE, FL 33772 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TOMMAY T. PEACOCK DPTS 02/23/2005