

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L00000006358

1. Entity Name
RIVERSIDE MANAGEMENT LC



Principal Place of Business
2578 ENTERPRISE ROAD, SUITE 110
ORANGE CITY, FL 32763

Mailing Address
2578 ENTERPRISE ROAD, SUITE 110
ORANGE CITY, FL 32763

FILED
08 JAN -9 PM 3:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01042008 No Chg-LLC

CR2E083 (12/07)

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4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired

☒ **\$5.00** Additional
Fee Required

6. Name and Address of Current Registered Agent

FLORIDA FILING & SEARCH SERVICES, INC.
155 OFFICE PLAZA DR.
SUITE A
TALLAHASSEE, FL 32301

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/9/08

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DE CARTERET, STEPHEN VICTORIA HOUSE, THE AVENUE SARK, CHANNEL ISLANDS,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

400114581284

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

Authorized Rep 1/9/08 302-421-5750

L00000006358

FLORIDA FILING & SEARCH SERVICES, INC.

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**P.O. BOX 10662, TALLAHASSEE, FL 32302
155 OFFICE PLAZA DRIVE, SUITE A, TALLAHASSEE, FL 32301
PHONE: (850) 216-0457 / FAX: (850) 216-0460**

DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

DATE: 1/9/2008

NAME: RIVERSIDE MANAGEMENT, LC

TYPE OF FILING: ANNUAL REPORT

COST: \$138.75 + \$5.00= \$143.75

RETURN: GOOD STANDING

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TALLAHASSEE, FLORIDA

NK

ACCOUNT: FCA000000015

AUTHORIZATION: PAUL / ABBIE HODGE

[Signature]