2005 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
Aug 30, 2005
Secretary of State

DOCUMENT# L00000014897

Entity Name: RIVER RIDGE TOWNCENTER, L.L.C.

Current Principal Place of Business:

11324 RIDGE ROAD
NEW PORT RICHEY, FL 34654

New Principal Place of Business:

Current Mailing Address:

11324 RIDGE ROAD
NEW PORT RICHEY, FL 34654

New Mailing Address:

FEI Number: 59-3687641 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BOYCE, MIKE
11324 RIDGE RD
NEW PORT RICHEY, FL 34654 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: BOYCE, MIKE
Address: 11324 RIDGE ROAD
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: MGRM (X) Delete
Name: REYNOLDS, B.J.
Address: 11324 RIDGE ROAD
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: MGRM (X) Delete
Name: WILLIAMSON, DONA
Address: 11324 RIDGE ROAD
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: MGRM (X) Delete
Name: NIELSON, HELMAR
Address: 11324 RIDGE ROAD
City-St-Zip: NEW PORT RICHEY, FL 34654

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: BOYCE, MIKE
Address: 11324 RIDGE ROAD
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 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.

SIGNATURE: MIKE BOYCE MGRM 08/30/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date