

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000003522

Entity Name: HIGH RIDGE PROPERTIES, L.L.C.

FILED  
Mar 29, 2011  
Secretary of State

## Current Principal Place of Business:

639 EAST OCEAN AVE. #407  
BOYNTON BEACH, FL 33435

## New Principal Place of Business:

640 EAST OCEAN AVE. SUITE 18 & 19  
BOYNTON BEACH, FL 33435

## Current Mailing Address:

639 EAST OCEAN AVE. #407  
BOYNTON BEACH, FL 33435

## New Mailing Address:

640 EAST OCEAN AVENUE SUITE 18 & 19  
BOYNTON BEACH, FL 33435

FEI Number: 26-0004647

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FENDER, MARC C  
639 EAST OCEAN AVENUE 407  
BOYNTON BEACH, FL 33435 US

## Name and Address of New Registered Agent:

FENDER, KIM E  
640 EAST OCEAN AVENUE SUITE 18 & 19  
BOYNTON BEACH, FL 33435 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: KIM FENDER

03/29/2011

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM  
Name: FENDER, KIM E  
Address: 640 E. OCEAN AVE., STE. 18 & 19  
City-St-Zip: BOYNTON BEACH, FL 33435

Title: MGR  
Name: FENDER, MARC C  
Address: 640 EAST OCEAN AVENUE, STE 18 & 19  
City-St-Zip: BOYNTON BEACH, FL 33435 US

Title: MGR  
Name: FENDER, TIRREL D  
Address: 640 EAST OCEAN AVENUE, STE 18 & 19  
City-St-Zip: BOYNTON BEACH, FL 33435 US

Title: MGR  
Name: FENDER, CYD T  
Address: 640 EAST OCEAN AVENUE, STE 18 & 19  
City-St-Zip: BOYNTON BEACH, FL 33435 US

I hereby 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: KIM FENDER

MGRM

03/29/2011

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