

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000004985

**FILED**  
**Apr 19, 2012**  
**Secretary of State**

**Entity Name:** BAINBRIDGE MANAGEMENT GROUP LLC

**Current Principal Place of Business:**

12765 WEST FOREST HILL BOULEVARD, STE 1307  
WELLINGTON, FL 33414

**New Principal Place of Business:**

**Current Mailing Address:**

12765 WEST FOREST HILL BOULEVARD, STE 1307  
WELLINGTON, FL 33414

**New Mailing Address:**

**FEI Number:** 65-1090810

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JEFFREY A. DEUTCH, P.A.  
7777 GLADES ROAD  
SUITE 300  
BOCA RATON, FL 33434 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  
**Name:** RAS MANAGER, LLC  
**Address:** 12765 WEST FOREST HILL BLVD STE 1307  
**City-St-Zip:** WELLINGTON, FL 33414

**Title:** P  
**Name:** SCHECHTER, RICHARD A  
**Address:** 12765 WEST FOREST HILL BOULEVARD, STE 1307  
**City-St-Zip:** WELLINGTON, FL 33414

**Title:** VS  
**Name:** KEADY, THOMAS J  
**Address:** 12765 WEST FOREST HILL BOULEVARD, STE 1307  
**City-St-Zip:** WELLINGTON, FL 33414

**Title:** V  
**Name:** GILES, RICHARD P  
**Address:** 12765 WEST FOREST HILL BOULEVARD, STE 1307  
**City-St-Zip:** WELLINGTON, FL 33414

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:** SANFORD FOX

MGR

04/19/2012

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