

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 17, 2003 8:00 am
Secretary of State

03-17-2003 90004 033 ****55.00

DOCUMENT # L01000005468

1. Entity Name
THE RIDGE GROUP, L.C.



Principal Place of Business
**9104 HIDDEN WATER CIRCLE
RIVERVIEW FL 33569**

Mailing Address
**9104 HIDDEN WATER CIRCLE
RIVERVIEW FL 33569**

2. Principal Place of Business

3. Mailing Address

13110 N. FLORIDA AVE

P O BOX 341542

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

TAMPA, FL

TAMPA, FL

Zip **33612**

Country **USA**

Zip

33694

Country



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-1101488**

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MCDERMOTT, MICHAEL J ESQ.
791 WEST LUMSDEN RD.
BRANDON FL 33511**

Name

ERIC CHEE CHAN

Street Address (P.O. Box Number is Not Acceptable)

~~P O BOX~~ 13110 N. FLORIDA AVE

City

TAMPA

FL

Zip Code **33612**

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

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State.
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE **MGR** ☒ Delete
NAME **DAVIS, MICHAEL L**
STREET ADDRESS **9104 HIDDEN WATER CIRCLE**
CITY-ST-ZIP **RIVERVIEW FL 33569**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
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CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **MGR** ☐ Change ☒ Addition
NAME **MUI LAM CHAN**
STREET ADDRESS **~~P O BOX~~ 13110 N. FLORIDA AVE**
CITY-ST-ZIP **TAMPA, FL 33612**

TITLE **MGR** ☐ Change ☒ Addition
NAME **ERIC CHEE CHAN**
STREET ADDRESS **13110 N. FLORIDA AVE**
CITY-ST-ZIP **TAMPA, FL 33612**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify 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 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 ERIC CHAN**

3/10/03 813 765 2408

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

Date

Daytime Phone #

CR2E083 (10/02)