

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000001319

FILED  
Feb 07, 2006  
Secretary of State

Entity Name: BLUE RIDGE INVESTMENTS, L.L.C.

## Current Principal Place of Business:

5998 LAS COLINAS CIRCLE  
LAKE WORTH, FL 33463

## New Principal Place of Business:

## Current Mailing Address:

5998 LAS COLINAS CIRCLE  
LAKE WORTH, FL 33463

## New Mailing Address:

FEI Number: 01-0600384

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MARCOTT, DENNIS J  
5998 LAS COLINAS CIRCLE  
LAKE WORTH, FL 33463 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: MARCOTT, DENNIS J  
Address: 5898 LAS COLINAS CIRCLE  
City-St-Zip: LAKE WORTH, FL 33463

Title: MGR ( ) Delete  
Name: N/A, NONE  
Address: NONE  
City-St-Zip: NONE, NA NONE

Title: MGR ( ) Delete  
Name: N/A, NONE  
Address: NONE  
City-St-Zip: NONE, NA NONE

Title: MGR ( ) Delete  
Name: JACOBSON, RONALD B  
Address: 6010 LAS COLINAS CIR  
City-St-Zip: LAKE WORTH, FL 33463

Title: MGR ( ) Delete  
Name: N/A, NONE  
Address: NONE  
City-St-Zip: NONE, NA NONE

Title: MGR ( ) Delete  
Name: N/A, NONE  
Address: NONE  
City-St-Zip: NONE, NA NONE

## ADDITIONS/CHANGES:

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

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

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

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 Chapter 119, 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: RONALD B. JACOBSON

MGR

02/07/2006

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