

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000012914

**FILED**  
**Apr 08, 2010**  
**Secretary of State**

**Entity Name:** NORTHRIDGE LAKES,LLC.

**Current Principal Place of Business:**

1100-4 PONCE DE LEON BLVD  
SAINT AUGUSTINE, FL 32084

**New Principal Place of Business:**

3700 US HIGHWAY 1 SOUTH  
%RUSTY LAW, LLC  
SAINT AUGUSTINE, FL 320867150 US

**Current Mailing Address:**

1100-4 PONCE DE LEON BLVD  
SAINT AUGUSTINE, FL 32084

**New Mailing Address:**

3700 US HIGHWAY 1 SOUTH  
%RUSTY LAW, LLC  
SAINT AUGUSTINE, FL 320867150 US

**FEI Number:** 20-5868706

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WOOD, JOHN  
1100-4 PONCE DE LEON BLVD.  
ST. AUGUSTINE, FL 32084 US

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

GRAUBARD, ROBERT  
2802 N 5TH STREET  
SAINT AUUSTINE, FL 320841837 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: ROBERT M. GRAUBARD

04/08/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: NORTHLAKES, LLC  
Address: 3700 US HIGHWAY 1 SOUTH.  
City-St-Zip: SAINT AUGUSTINE, FL 320867150 US

Title: P  
Name: WARREN, RONALD L  
Address: 430 MARSH POINT CIRCLE  
City-St-Zip: SAINT AUGUSTINE, FL 320805863 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: RONALD L. WARREN

P

04/08/2010

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