


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 24, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000015819 1. Entity Name OCEAN RIDGE TOWNHOMES, LLC	
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Principal Place of Business 177 NORTH U.S. HIGHWAY #1 BOX 240 TEQUESTA, FL 33469	Mailing Address 177 NORTH U.S. HIGHWAY #1 BOX 240 TEQUESTA, FL 33469
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DO NOT WRITE IN THIS SPACE



03172005No Chg-LLC

CR2E083 (10/03)

4. FEI Number 43-1998982	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent WRIGHT, LARRY E 177 NORTH U.S. HIGHWAY #1, BOX 240 TEQUESTA, FL 33469	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

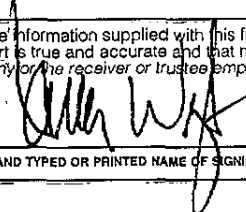
**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM WRIGHT, LARRY E 177 N. U.S. HWY #1 TEQUESTA, FL
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03/24/05-80019-020 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  **3-21-05** **564-602-9971**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #