

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 23, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000019989

1. Entity Name
ROBIN'S RIDGE DEVELOPMENT, LLC



Principal Place of Business
**17 SOUTH PALAFOX STREET, STE. 394
PENSACOLA, FL 32501**

Mailing Address
**PO BOX 12358
PENSACOLA, FL 32591**



03132005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
54-2065485

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BAKER, RICHARD
17 SOUTH PALAFOX STREET, STE. 394
PENSACOLA, FL 32501**

**DO NOT WRITE
IN THIS SPACE**

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 _____

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

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	BAKER, RICHARD R
STREET ADDRESS	17 SOUTH PALAFOX ST 394
CITY-ST-ZIP	PENSACOLA, FL 32501
TITLE	MGR
NAME	GILMORE, DAN J
STREET ADDRESS	4400 BAYOU BLVD 35
CITY-ST-ZIP	PENSACOLA, FL 32503
TITLE	MGR
NAME	RITCHIE, WALTER JR
STREET ADDRESS	PO BOX 13401
CITY-ST-ZIP	PENSACOLA, FL 32591
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000326119
04/23/05-80044-003 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)(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: *Richard R Baker* **Richard R Baker**

4-20-05 **850-434-5330**

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

Date

Daytime Phone #