

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000024084

FILED
Apr 25, 2005
Secretary of State

Entity Name: LOT 77 RIVER RIDGE LLC

Current Principal Place of Business:

312 S. OLD DIXIE HIGHWAY
STE 207
JUPITER, FL 33458

New Principal Place of Business:

Current Mailing Address:

312 S. OLD DIXIE HIGHWAY
STE 207
JUPITER, FL 33458

New Mailing Address:

FEI Number: 20-0144249 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOCKE, FREDRICK T
312 S. OLD DIXIE HIGHWAY
STE 207
JUPITER, FL 33458 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/MEMBERS:

Title: MGR () Delete
Name: LOCKE, FREDRICK T
Address: 312 S. OLD DIXIE HIGHWAY, STE 207
City-St-Zip: JUPITER, FL 33458 US

Title: MGR () Delete
Name: COLASURDO, ROBERT
Address: 125 EVERGREEN HILL ROAD
City-St-Zip: FAIRFIELD, CT 06430 US

Title: MGR () Delete
Name: TOWER, STEPHEN
Address: 200 CONNECTICUT AVENUE
City-St-Zip: NORWAK, CT 06854 US

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:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: FRED T. LOCKE MGR 04/25/2005

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