2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000006813

1. Entity Name
CEDAR RIDGE II, LLC

Principal Place of Business	Mailing Address
1901 SOUTH TAMIAMI TRAIL, SUITE A VENICE, FL 34293	1901 SOUTH TAMIAMI TRAIL, SUITE A VENICE, FL 34293

DO NOT WRITE IN THIS SPACE

01252006No Chg-LLC   CR2E083 (11/05)

4. FEI Number 65-1178179	Applied For
	Not Applicable

5. Certificate of Status Desired ☒ **$5.00** Additional Fee Required

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6. Name and Address of Current Registered Agent

ROBERTS, GREGORY C ESQUIRE
341 VENICE AVENUE WEST
VENICE, FL 34285

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7. 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 revising)   DATE

Filing Fee is $50.00
Due by May 1, 2006

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGR
NAME	CLOUTIER, JACQUES
STREET ADDRESS	1901 S. TAMIAMI TRAIL STE A
CITY ST ZIP	VENICE, FL 34293
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
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NAME	
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CITY ST ZIP	

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02/14/06-80034-017 55.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: _____   1-31-06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #