

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 20, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000016438

1. Entity Name
PINEAPPLE RIDGE, L.L.C.



Principal Place of Business
2101 S WAVERLY PL., SUITE 300
MELBOURNE, FL 32901

Mailing Address
2101 S WAVERLY PL., SUITE 300
MELBOURNE, FL 32901



01062006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
03-0516880

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

WHITE, BARRON F
2101 S. WAVERLY PL., SUITE 300
MELBOURNE, FL 32901

**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, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM THE SIX, L.L.C. 2101 S. WAVERLY PL., SUITE 300 MELBOURNE, FL 32901
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM VHCS HOLDINGS, INC. 2101 S. WAVERLY PL., SUITE 300 MELBOURNE, FL 32901
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM CEG LAND PARTNERSHIP, LLC 760 NORTH DRIVE, SUITE E. MELBOURNE, FL 32934
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

U00000519739
05/02/06-80069-002 50.00

**DO NOT WRITE
IN THIS SPACE**

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:

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

Date

Daytime Phone #

4/27/06