

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000023668

Entity Name: LONE RIDER LLC

FILED  
Feb 05, 2005  
Secretary of State

**Current Principal Place of Business:**

3489 HWY 231 N.  
COTTONDALE, FL 32431

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 146  
COTTONDALE, FL 32431

**New Mailing Address:**

FEI Number: 80-0070096

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BUSINESS FILINGS INCORPORATED  
660 EAST JEFFERSON STREET  
TALLAHASSEE, FL 32301 US

**Name and Address of New Registered Agent:**

GARCIA, CHARLEEN M MS.  
4460 BUTLER AVE.  
MARIANNA, FL 32446 US

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: CHARLEEN M. GARCIA

02/05/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: HIGDON, MELANIE  
Address: 4883 BEVAN LANE  
City-St-Zip: MARIANNA, FL 32448

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: HIGDON, MELANIE L  
Address: 4883 BEVAN LANE  
City-St-Zip: MARIANNA, FL 32448

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: MELANIE L. HIGDON

MGRM

02/05/2005

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