

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 27, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # L03000052656**

1. Entity Name  
**BERRY'S RIDGE, LLC**



Principal Place of Business  
**1053 MAITLAND CENTER COMMONS BLVD.  
2ND FLR  
MAITLAND, FL 32751**

Mailing Address  
**1053 MAITLAND CENTER COMMONS BLVD.  
2ND FLR  
MAITLAND, FL 32751**



04192007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**20-1286391**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**WALKER, BERRY J JR., ESQ  
C/O WALKER & TUDHOPE, P.A.  
1053 MAITLAND CENTER COMMONS BLVD., 2ND FL  
MAITLAND, FL 32751**

**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]*  
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

**4/23/07**  
DATE

**Filing Fee is \$50.00  
Due by May 1, 2007**

U000000738559

05/11/07-80071-020 50.00

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
**MGR  
WALKER, BERRY J JR.  
1053 MAITLAND CENTER COMMONS BLVD., 2ND FL  
MAITLAND, FL 32751**

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

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

DATE

Daytime Phone #

**4/23/07**