8/31/2

FILED Sep 30, 2004 8:00 am Secretary of State 08-31-2004 90031 050 ****50.00

 Entity Name 	ENT # L0300005 DGE PROPERTIES, LI			08-31-2004 90031 030 ***** 30.0
Principal Place of Business Mailing Address 15321 ONE MILE ROAD 15321 ONE MILE ROAD DELRAY BEACH, FL 33446 DELRAY BEACH, FL 33446				34010630
2. Principal Place of Business		3. Mailing Address		S DOTTON OR BEINE HILL BOYN BANK HILL BOYN BOYN BOYN BOYN BOYN BOYN BOYN
Suite, Apt. #, etc.		Suite, Apt, #, etc.		02172004 Chg-LLC CR2E083 (10/03)
City & State		City & State		4. FEI Number Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired
6	Name and Address of Currer	nt Registered Agent	Name	7. Name and Address of New Registered Agent
SICILIANO, THOMAS V				ss (P.O. Box Number is Not Acceptable)
•			City	FL Zip Code
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, typod or printed risme of registered agent and title if applicable. (NOTE: Registered Agent applicable displacture required when renetating) DATE				
Filing Fee is \$50.00 Due by May 1, 2004 Make check payable to Florida Department of State				
9.	MANAGING MEM	BERS/MANAGERS	10,	- ADDITIONS/CHANGES
NAME GI STREET ADDRESS 1.5	GR RAY, LIONEL J JR 321 ONE MILE ROAD ELRAY BEACH, FL 33446	☐ Delete	MAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition.
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Detaile	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE MAME STREET ADDRESS CITY-ST-ZIP	to the second of	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS ÇITY-ST-ZIP	☐ Change ☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP	en e	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
11. Hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section.119.07(3)(i), Florida Statules. 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 flability company or the receiver or trustee empowered to execute this report as required by Chapter 608. Florida Statutes. SIGNATURE: SIGNATURE: SIGNATURE: SIGNATURE: SIGNATURE: SOUTH TO THE OR PENTED NAME OF SIGNATURA MANAGER, OR AUTHORIZED REPRESENTATIVE. Date to the limited flability company or the receiver or trustee empowered to execute this report as required by Chapter 608. Florida Statutes.				
	MAN CONTRACTOR ON PRINTED NAME	OF BUILD WANAGERS IN BER, MA	UNIVER OF AUTHORIZED REPR	California (1915) - Califo



Wednesday, August 25, 2004.

Dear Florida Department of State:

This letter is in reference to the 2004 For Profit Corporation Annual Report notification letter that I received. I had the understanding that my attorney had filed both documents for ELJ Properties, Inc. and Florida Ridge Properties until I received the notice of Intent to Dissolve. Please accept my apologies for the oversight. I am enclosing two checks in the amounts of \$150.00 each in anticipation of a fair judgment. Thank you for your understanding and time.

Sincerely,

Lionel Gray

ELJ PROPERTIES, INC.

Document # P02000054068

FEI # 02-0611042

Florida Ridge Properties, LLC Document # L03000055380



FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State

September 2, 2004

FLORIDA RIDGE PROPERTIES, LLC 15321 ONE MILE ROAD DELRAY BEACH, FL 33446

Subject: FLORIDA RIDGE PROPERTIES, LLC

Reference Number:

L03000055380

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

TO AVOID THE ADMINISTRATIVE DISSOLUTION/REVOCATION, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 6478, TALLAHASSEE, FLORIDA 32314 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/ML ANNUAL REPORTS SECTION