

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 19, 2005 8:00 am
Secretary of State

04-19-2005 90027 046 ****55.00

DOCUMENT # L03000056569

1. Entity Name
GUNDLACH PROPERTIES RIDGE ROAD, L.L.C.



Principal Place of Business
914 NORTH ATLANTIC DRIVE
LANTANA, FL 33462

Mailing Address
P.O. BOX 3673
LANTANA, FL 33465-3673

60000400



04092005 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0714849

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

GUNDLACH, STEPHEN C
914 NORTH ATLANTIC DRIVE
LANTANA, FL 33462

**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, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	GUNDLACH, PAUL B
STREET ADDRESS	121 PARK LANE EAST
CITY-ST-ZIP	HYPOLUXO, FL 33462
TITLE	MGRM
NAME	GUNDLACH, STEPHEN C
STREET ADDRESS	914 NORTH ATLANTIC DRIVE
CITY-ST-ZIP	LAKE WORTH, FL 33462
TITLE	MGRM
NAME	GUNDLACH, STANLEY J
STREET ADDRESS	129 PARK LANE EAST
CITY-ST-ZIP	HYPOLUXO, FL 33462

**DO NOT WRITE
IN THIS SPACE**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify 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 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 #

561 582-7847
STEPHEN C GUNDLACH 04-15-2005