

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000006161

Entity Name: GRISSOM RIDGE, LLC

FILED
Apr 18, 2008
Secretary of State

Current Principal Place of Business:

66 NORTH ATLANTIC AVE., SUITE 205
COCOA BEACH, FL 32931

New Principal Place of Business:

111 CLEVELAND AVE
COCOA BEACH, FL 32931

Current Mailing Address:

66 NORTH ATLANTIC AVE., SUITE 205
COCOA BEACH, FL 32931

New Mailing Address:

111 CLEVELAND AVE
COCOA BEACH, FL 32931

FEI Number: 42-1662406

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCALES, JOSEPH R
66 NORTH ATLANTIC AVE., SUITE 205
COCOA BEACH, FL 32931 US

Name and Address of New Registered Agent:

SCALES, JOSEPH R
111 CLEVELAND AVE
COCOA BEACH, FL 32931 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: JR SCALES

04/18/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ENDLESS SUMMER VILLA, S, INC.
Address: 717 - 2 NE 12TH TERRACE
City-St-Zip: BOYNTON BEACH, FL 33435

Title: MGRM () Delete
Name: MACH ONE DEVELOPMENT, , INC.
Address: 66 NORTH ATLANTIC AVE., SUITE 205
City-St-Zip: COCOA BEACH, FL 32931

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MACH ONE

M

04/18/2008

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