

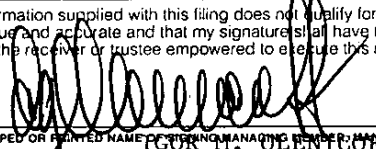


# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 20, 2005 8:00 am**  
**Secretary of State**

04-20-2005 90043 041 \*\*\*\*50.00

<b>DOCUMENT # L04000019746</b> 1. Entity Name <b>4875 PARK RIDGE, LLC</b>					
Principal Place of Business <b>2500 QUANTUM LAKES DR., #101 BOYNTON BEACH, FL 33426</b>			Mailing Address <b>2500 QUANTUM LAKES DR., #101 BOYNTON BEACH, FL 33426</b>		
2. Principal Place of Business  Suite, Apt. #, etc.		3. Mailing Address <b>7 Corporate Plaza</b>  Suite, Apt. #, etc.		  04152005 Chg-LLC CR2E083 (10/03)  4. Filing Number <b>03-0550328</b> Applied For <input type="checkbox"/> Not Applicable	
City & State		City & State <b>Newport Beach, CA</b>			
Zip		Zip <b>92660</b>			
Country		Country <b>USA</b>			
5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b>					
6. Name and Address of Current Registered Agent  <b>NORRIS, DAVID B 712 U.S. HIGHWAY ONE, STE. 400 NORTH PALM BEACH, FL 33408</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>		
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>					
<b>Filing Fee is \$50.00 Due by May 1, 2005</b>		<b>Make check payable to Florida Department of State</b>			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
[Faded/Illegible Entry]			<b>MGRM Quantum Limited Partners, Ltd. 2500 Quantum Lakes Dr., Ste. 101 Boynton Beach, FL 33426</b>		
[Faded/Illegible Entry]			<b>MGRM Secured Holdings, Inc. 7 Corporate Plaza Newport Beach, CA 92660</b>		
[Faded/Illegible Entry]			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
[Faded/Illegible Entry]			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
[Faded/Illegible Entry]			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
[Faded/Illegible Entry]			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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.					
<b>SIGNATURE:</b> 			Managing		4-18-05 (949) 719-7212
SIGNATURE AND TYPED OR PRINTED NAME OF FILING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #					