2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000031598

Entity Name: MYSTERY RIDGE, LLC

Address:

City-St-Zip:

31610 US 27

HAINES CITY, FL 33844

FILED Mar 09, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 31610 UW HWY 27 HAINES CITY, FL 33844 **Current Mailing Address: New Mailing Address:** 31610 UW HWY 27 HAINES CITY, FL 33844 FEI Number: 20-1056336 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DESROCHERS, CHRISTOPHER 2504 AVE G NW WINTER HAVEN, FL 33880 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM () Delete Title: () Change () Addition SHERRARD, CHARLES W MGRM Name: Name: Address: 3831 GAINES CT. Address: City-St-Zip: WINTER HAVEN, FL 33884 City-St-Zip: Title: MGMR () Delete Title: () Change () Addition Name: GARRARD V, LOUIS F MGRM Name: Address: 121 RAINTREE CT. Address: City-St-Zip: AUBURNDALE, FL 33823 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition BOCK, THOMAS A MGRM Name: Name:

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

Address:

City-St-Zip:

SIGNATURE: CHARLES W. SHERRARD MGRM 03/09/2006