

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 30, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000043402

1. Entity Name

DUNE RIDGE VENTURES, L.L.C.



Principal Place of Business

P.O. BOX 1605

PANAMA CITY, FL 32402

Mailing Address

P.O. BOX 1605

PANAMA CITY, FL 32402

DO NOT WRITE IN THIS SPACE



04152007No Chg-LLC

CR2E083 (11/05)

4. FEI Number

32-0148536

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

KOLK, JACALYN N
4116 HIGHWAY 231 NORTH
PANAMA CITY, FL 32404

**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, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
DAVIS, JAMES W
P.O. BOX 1605
PANAMA CITY, FL 32402

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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U000000745441
05/16/07-80028-017 50.00

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 #

4-17-07