



FILED
Mar 16, 2006 8:00 am
Secretary of State

01-23-2006 90227 034 ****50.00

2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L05000048724			
1. Entity Name WOODLAND RIDGE ESTATES, LLC			
Principal Place of Business 1937 EAST ATLANTIC BLVD., STE. 9 POMPANO BEACH, FL 33060		Mailing Address 1937 EAST ATLANTIC BLVD., STE. 9 POMPANO BEACH, FL 33060	
2. Principal Place of Business 2101 N ANDREWS AVE City & State, etc. 907		3. Mailing Address 2101 N. ANDREWS AVE City & State, etc. 907	
City & State WILTON MANORS		City & State WILTON MANORS	
Zip 33311		Country USA	
4. FEL Number 34-2047519		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent GROSCH, RICK 1937 EAST ATLANTIC BLVD., STE. 9 POMPANO BEACH, FL 33060		7. Name and Address of New Registered Agent Name: Street Address (P.O. Box Number is Not Acceptable): City: FL Zip Code:	
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)</small>			
Filing Fee is \$80.00 Due by May 1, 2006		State check payable to Florida Department of State	
9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP MANAGING MEMBER Rick Grosch 2124 NE 44th St Ft. Lauderdale, FL 33308		TITLE NAME STREET ADDRESS CITY - ST - ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP MANAGING MEMBER HENRIK BRILLEN P.O. Box 612092 Pompano Beach FL 33061		TITLE NAME STREET ADDRESS CITY - ST - ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 606, Florida Statutes.			
SIGNATURE:  Rick Grosch		X 01/20/2006 954-685-2000	



ATTACHMENT
30002603

FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 30, 2006

WOODLAND RIDGE ESTATES, LLC
2101 N ANDREWS AVE
SUITE 107
POMPANO BEACH, FL 33060

Subject: **WOODLAND RIDGE ESTATES, LLC**

Reference Number: **105000048724**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report has not been filed and a copy is being returned for the following correction(s):

List the complete title, name, street address, city, state and zip code of each manager, managing member or principal of the limited liability company.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/JE

ANNUAL REPORTS SECTION

P.O. BOX 6478 - Tallahassee, Florida 32314