

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000077244

Entity Name: ASPEN RITZ, LLC

FILED
Apr 13, 2009
Secretary of State

Current Principal Place of Business:

3524 TURENNE WAY
WELLINGTON, FL 33467 US

New Principal Place of Business:

Current Mailing Address:

3524 TURENNE WAY
WELLINGTON, FL 33467 US

New Mailing Address:

FEI Number: 20-3407813

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GERSON, GARY N
1645 PALM BEACH LAKES BLVD STE 1200
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

ANDREACCI, DANIEL J
3524 TURENNE WAY
WELLINGTON, FL 33449 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: DANIEL ANDREACCI

04/13/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ANDREACCI, DANIEL
Address: 3524 TURENNE WAY
City-St-Zip: WELLINGTON, FL 33467

Title: MGR () Delete
Name: FALCONE, ART
Address: 1951 NORTHWEST 19TH STREET SUITE 200
City-St-Zip: BOCA RATON, FL 33431

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: DANIEL ANDREACCI

MGR

04/13/2009

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