Zip Country Zip Country Zip Country A Confliction of Status Docined \$5,00 Add 8. Runne and Address of Gurrent Registered Agent 7. Heres and Address of Gurrent Registered Agent 7. Heres and Address of Here Registered Agent 7. Heres and Address of Here Registered Agent EDMUNDSON_JEANNETTE F 205 SLOANS RIDGE RD Stool Address of Here Registered Agent 1. Heres and Address of Here Registered Agent EDMUNDSON_JEANNETTE F 205 SLOANS RIDGE RD Stool Address of Here Registered Agent Name B. The boxe number rained with, hubma the statement to the purpose of changing as registered office or registered agent, or both in the State of Porids. I am tenders with in the obligations of registered agent. Stool Address (P.O. Box Number is Hol Acceptable) Stool Address (P.O. Box Number is Hol Acceptable) Cry FL 20 Coth B. The boxe number of registered agent. Stool Address of Here Registered Agent Cry FL 20 Coth Stool Address (P.O. Box Number is Hol Acceptable) Cry FL 20 Coth FL 20 Coth Stool Address (P.O. Box Number is Hol Acceptable) Cry FL 20 Coth FL 20 Coth Stool Address (P.O. Box Number is Hol Acceptable) C				BILITY CON L REPORT	MPANY			y of Sta 034 032 ****50	
1772-2017-02.00 365 SUANKS ENDER RD GROVELAND, FL. 34735 365 SUANKS ENDER RD GROVELAND, FL. 34735 2. Principal Pace of Business 1. Matting Address 01042008 Chg-LLC CR2E003 (11/05) Cay & State Charley 2p Country 2p Country 8. Certificate of Business 1. Matting Address 2p Country 2p Country 2p Country 8. Certificate of Busines of Here Registered Agent 8. Name and Address of Current Registered Agent Name Certificate of Busines of Here Registered Agent Name 8. Name and Address of Current Registered Agent Name Stool Address of Here Registered Agent Name 8. Name and Address of Current Registered Agent Name Stool Address of Here Registered Agent Name 8. The above named entry future the future of the purpose of charging 69 registered office or registered agent, or boot, in the State of Folds. 1 am lamble with the Acceptable) Cert BRIMATURE The above named entry future tare of the purpose of charging 69 registered office or registered agent, or boot, in the State of Folds. 1 am lamble with tare of the purpose of charging for registered agent, or boot, in the State of Folds. 1 am lamble with tare of the purpose of charging for registered agent, or boot, in the State of Folds. 1 am lamble with tare of the purpose of charging for registered agent, or boot, in the State of Folds. 1 am lamble with tar	1. Entity Narr	6		7491					
2 / Protect end of contract Image: State in the contract Image: State i	365 SLOANS	RIDGE RD		365 SLOANS RIDGE R		~			
Chy & State Chy & State Chy & State A. Fill Number A. Reine and Address of Country Zo Country Country Zo Country A. Reine and Address of Country A. Continue of State Desired State A. Fill Number A. Reine and Address of Country Zo Country Zo Country A. Continue of State Desired State A. Reine and Address of Country Zo Country R. Continue of State Desired State Fill Number A. Reine and Address of Country A. Reine and Address of Country Nume Nume State Fill Number A. Reine and Address of Country State of Address of Country Nume Nume Nume State Fill Number in Not Acceptable) City Fill Zo Country Country Nume Nume State of Policia. I am tender with ite of the purpose of charding as registered office of registered agent, or both. In the State of Policia. I am tender with ite on of registered agent, or both. In the State of Policia. I am tenders State of registered agent. Policie Registered agent. Country Registered ag	2. Principal Place of Business			3. Maing Address					
Zp Country Zp Country Zp Country Image: Stable Dosired \$5.00 Acc Zp Country Image: Stable Dosired Image: Stable Dosired \$5.00 Acc A. Reme and Address of Current Registering Agen I. Name Image: Stable Dosired \$5.00 Acc EDMUNDSON, "JEANNETTE F Strott Address (P.O. Box Number is Not Acceptable) Cr FL Zp Country 205 SLOANS RIDGE RD Strott Address (P.O. Box Number is Not Acceptable) Cr FL Zp Country A. The store and address of registered office or registered office or registered spint, or both, in the State of Poids, I am tendles with in a obtained agent. Strott Address (P.O. Box Number is Not Acceptable) Strott Address of registered agent. Cr FL Zp Country Strott Address of registered agent. Strott Address of registered agent. Strott Address of registered agent. The store of registered agent. Store Address of registered agent. Store Address of registered agent. Store Address of registered agent. Store Address of registered agent. Store Address of registered agent. Store Address of registered agent. Store Address of registered agent. Store Address of registered agent. Store Address of registered agent. Store Address of registered agent. Store Address of registered agent. Store Address of registered agent. Store Address of regis	Suite. Apt.	9, etc.		Suite, Apt. #, etc.		01042006	Chg-LLC	CR2E083 (11/05)
A. Hame and Address of Current Registered Agent 7. Hame and Address of Current Registered Agent A. Hame and Address of Current Registered Agent 7. Hame and Address of Kerr Registered Agent EDMUNDSON: "LEANNETTE F 365 SLOANS RIDGE RD GROVELAND, FL 34735 Stress Address (P.O. Box Number is Not Acceptable) City FL 295 SLOANS RIDGE RD Stress Address (P.O. Box Number is Not Acceptable) City FL 200 Control on a stress of registered agent. Stress Address (P.O. Box Number is Not Acceptable) Stress Address (P.O. Box Number is Not Acceptable) City Stress Address (P.O. Box Number is Not Acceptable) City City FL Zp Code Stress Address (P.O. Box Number is Not Acceptable) City City FL Zp Code Stress Address (P.O. Box Number is Not Acceptable) City Stress Address (P.O. Box Number is Not Acceptable) City Stress Address (P.O. Box Number is Not Acceptable) City Stress Address (P.O. Box Number is Not Acceptable) International Address (P.O. Box Number is Not Acceptable) Stress Address (P.O. Box Number is Not Acceptable) International Address (P.O. Box Number is Not Acceptable) Stress Address (P.O. Box Number is Not Acceptable) International Address (P.O. Box Number is Not Acceptable) Stress Address (P.O. Box Number is Not Acc	City & Stat	, ,		City & State		A FEI Num	56386		oplie lot Ap
EDMUNDSON, JEANNETTE F Name EDMUNDSON, JEANNETTE F Stool Address (P.O. Box Number is Not Acceptable) GROVELAND, FL 34738 Stool Address (P.O. Box Number is Not Acceptable) City FL 2p Code B. The above named entry submits the statement to the purpose of changing is registered office or registered agent, or both, in the State of Piorida. Lem tembler with it we obligators of registered agent. Stool Address (P.O. Box Number is Not Acceptable) B. The above named entry submits the statement to the purpose of changing is registered office or registered agent, or both, in the State of Piorida. Lem tembler with it we obligators of registered agent. Stool Address of registered agent. SIGNATURE Evaluation space is above and the function of a state. police is above registered agent. Date SIGNATURE Evaluation space is above and the interval registered agent. Date The above register agent agen	Ζip		Country	Zip	Country	6. Certificat	ie of Status Dosired		
EDMUNDSON, JEANNETTE F 365 SLCANS RIDGE RD GROVELAND, FL 34739 8. The above named settor submits its statement to the purpose of charging its registered office or registered agent, or both, in the State of Porida. I am ternities with a re obligations of registered agent. SUMATURE Stress State of registered agent. SUMATURE Stress State of Porida. I am ternities with a statement to the purpose of charging its registered office or registered agent. or both in the State of Porida. I am ternities with a state statement of the purpose of charging its registered office or registered agent. SUMATURE Stress State of registered agent. SUMATURE Stress State of Porida. I am ternities with a statement of the state of porida. I am ternities with a Stress Agent is \$50,000 Stress Stress State of Porida. I am ternities with a statement of State Stress Agent is \$50,000 Stress Stress State of Porida. I am ternities with a statement of State Stress Agent is \$50,000 Stress Agent is		6. Kerne	and Address of Current	f Registered Agem		7. Name an	d Address of New R		
The above number and a statement to the purpose of changing its registered office or registered spint, or both, in the Suite of Pionide. 1 am tembles with a true obligations of negative agent, or both in the Suite of Pionide. 1 am tembles with a true obligations of negative agent, are both agent, and the statement of negative agent are an agent are the agent agent are the agent agent. SIGNATURE Deven, registered agent. SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE S	365 SLOA	NS RIDGE	RD			386 (P.O. Blox Num	ber is Not Acceptable	·	
CTY-ST-2P 365 3 / 0 Ants CLOVE RD CTY-ST-2P TTL 6/RBUELAND, P1 3473/00 bete TTL INME STRET ADDRESS STRET ADDRESS CTY-ST-2P CTY-ST-2P TTLE Dates TTLE INME Dates TTLE INME CTY-ST-2P CTY-ST-2P TTLE Dates TTLE INME CTY-ST-2P CTY-ST-2P TTLE Dates TTLE INME CTY-ST-2P CTY-ST-2P TTLE CDates TTLE INME Dates TTLE INME CDates TTLE INME CDates TTLE INME Dates TTLE INME CDates TTLE INME NAME CDates				a and the A applicative piC	TE Reputed Apen agricuty re	والمتحاد جالا ورمن		a check prysble to	 be
Mule Mule STREET ADDRESS STREET ADDRESS CTV-51-29 CTV-51-29 ITULE ID bales ITULE ITULE ID bales ITTULE ITULE ID bales ITTULE ITULE ID bales ITTULE ITULE ID bales ITTULE ITTULE ID bales ITTULE<			is \$80.00 y 1, 2006			9.000 of an estimating	Florida	e chick pryeble to Department of Stat	
NMAE NMAE STREET 400RESS STREET 400RESS CTV-51-0P CTV-51-2P TTLE CD 04% NMAE NUAE STREET 400RESS CTV-51-2P TTLE CD 04% NUAE NUAE STREET 400RESS CTV-51-2P TTLE CTV-51-2P<	S. ITTLE IMARE STREET ADDRESS	MAN Stan	на 880.00 1, 2006 Маладила мема М. П. Е. П. П.	ERS/MANAGERS	10. ITTLE NAME STRET ADDRESS		Florida	e chick prysible to a Department of Stat (CHANGES	
NAME STREET ADDRESS C(TV-ST-2P TTLE ASME	P. ITTLE MAKE STRET ACOMESS STRET ACOMESS TITLE STRET ACOMESS	MAN Stan	на 880.00 1, 2006 Маладила мема М. П. Е. П. П.	ERS/MANAGERS	10. TTTL: RAME STREET ADDRESS CITY-SS-20 TTL: RAME STREET ADDRESS		Florida	e check psyable to a Department of Stat (CHANGES Change	Ċ
NUL NUL	P. TITLE MARE STREET ADDRESS CITY-ST-2P TITLE NAME STREET ADDRESS CITY-ST-2P TITLE NAME STREET ADDRESS STREET ADDRESS	MAN Stan	на 880.00 1, 2006 Маладила мема М. П. Е. П. П.	ERS/MANAGERS Data W DSOW We RD 3473/00 Data	10. TTLL NAME STIRET ADDRESS COTY - 51 - 20 TTLL NAME STIRET ADDRESS COTY - 51 - 20 TTLL NAME STIRET ADDRESS		Florida	CHANGES	0
Singer Admigs Criv-Sr-2P	9. TITLE MARE STRET ACOMESS CITY-ST-20 TITLE MARE STRET ACOMESS CITY-ST-20 TITLE MARE STRET ADDRESS CITY-ST-20 TITLE MARE STRET ADDRESS	MAN Stan	на 880.00 1, 2006 Маладила мема М. П. Е. П. П.	ERS/MANAGERS Dates Dow DSOW We RAD 347360 Deter	10. TTLL IMME STRET ACORESS CITY-ST-2P TTLL IMME STRET ACORESS CITY-ST-2P TTLL IMME STRET ACORESS CITY-ST-2P		Florida	e chieck payreble to a Department of Stat (CHANGES Charge Charge	
TILE Detain TILE Change	9. TITLE MARE STRET ACOMESS CITY-ST-2P TITLE MARE STRET ACOMESS CITY-ST-2P TITLE NAME STRET ACOMESS CITY-ST-2P TITLE NAME STRET ACOMESS CITY-ST-2P TITLE ASAME STRET ACOMESS STRET ACOMESS	MAN Stan	на 880.00 1, 2006 Маладила мема М. П. Е. П. П.	ERS /MANAGERS Doess Doess Doess Doess Doess 2 473 for Doess Doess Doess	10. 11. 11. 11. 11. 11. 11. 11.		Florida	a chieck physiole to a Department of Stat (CHANGES (Change (Change (Change (Change (Change (Change	

.



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 10, 2006

5

RIDGELAND PROPERTIES ,LLC 365 SLOANS RIDGE RD GROVELAND, FL 34736

Subject: RIDGELAND PROPERTIES, LLC

Reference Number:

L05000077491

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report <u>has not been filed</u> 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.

/CJ ANNUAL REPORTS SECTION

P.O. BOX 6478 - Tallahassee, Florida 32314

وقيد بدو