2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 02, 2007
Secretary of State

DOCUMENT# L06000004442

Entity Name: RIDGE SHORE INVESTMENTS, LLC

Current Principal Place of Business:

4158 INVERRARY DRIVE
SUITE 510
FORT LAUDERDALE, FL 33319

New Principal Place of Business:

Current Mailing Address:

4158 INVERRARY DRIVE
SUITE 510
FORT LAUDERDALE, FL 33319

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

BROWN, BEVIN C
220 SW 21 WAY
FORT LAUDERDALE, FL 33312 US

Name and Address of New Registered Agent:

BROWN, BEVIN C
1249 SW 46 AVE
1413
POMPANO BEACH, FL 33069 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: BEVIN C. BROWN 05/02/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: SHORTRIDGE, CARL A
Address: 4158 INVERRARY DRIVE, # 510
City-St-Zip: FORT LAUDERDALE, FL 33319

Title: MGR ( ) Delete
Name: BURROWES, ANNETTE
Address: 4158 INVERRARY DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33319

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: BEVIN C. BROWN RA 05/02/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date