

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000031950

Entity Name: CEDAR RIDGE POINTE, LLC

FILED
Jan 31, 2007
Secretary of State

Current Principal Place of Business:

685 OLD TREELINE TRAIL
DELAND, FL 32724

New Principal Place of Business:

2235 S. WOODLAND BLVD
SUITE 105
DELAND, FL 32720

Current Mailing Address:

685 OLD TREELINE TRAIL
DELAND, FL 32724

New Mailing Address:

2235 S. WOODLAND BLVD.
SUITE 105
DELAND, FL 32720

FEI Number: 20-5038091

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOWE, RONALD
685 OLD TREELINE TRAIL
DELAND, FL 32724 US

Name and Address of New Registered Agent:

MASTERS, KAREN
2235 S. WOODLAND BLVD.
SUITE 105
DELAND, FL 32720 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: KAREN MASTERS

01/31/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HOWE, RONALD
Address: 685 OLD TREELINE TRAIL
City-St-Zip: DELAND, FL 32724

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MASTERS, KAREN
Address: 2235 S. WOODLAND BLVD. SUITE 105
City-St-Zip: DELAND, FL 32720

Title: MGRM () Change (X) Addition
Name: HOWE, PATRICIA
Address: 2235 S. WOODLAND BLVD. SUITE 105
City-St-Zip: DELAND, FL 32720

Title: MGRM () Change (X) Addition
Name: TRUBA, KATHLEEN
Address: 2235 S. WOODLAND BLVD. SUITE 105
City-St-Zip: DELAND, FL 32720

I hereby certify that the information supplied with this filing does not qualify for the 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: KAREN MASTERS

MGMR

01/31/2007

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