2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000085575

Entity Name: PALOMINO RIDGE, LLC

Address:

City-St-Zip:

FILED Feb 05, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5281 SW33RD ST. OCALA, FL 34474 **Current Mailing Address: New Mailing Address:** P.O. BOX 772165 OCALA, FL 34477 FEI Number: 22-3942374 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: (X) Change () Addition MGR () Delete LYNCH, FRANCIS LYNCH, FRANCIS Name: Name: 5281 SW33RD ST. Address: 5281 SW33RD ST. Address: City-St-Zip: OCALA, FL 34474 City-St-Zip: OCALA, FL 34474 US Title: MGR () Delete Title: MGR (X) Change () Addition LYNCH, NICOLE Name: LYNCH, NICOLE Name: Address: 5281 SW33RD ST. Address: 5281 SW33RD ST. City-St-Zip: OCALA, FL 34474 City-St-Zip: OCALA, FL 34474 US Title: () Delete Title: (X) Change () Addition LYNCH, NICOLE LYNCH, PATRICK Name: Name: 5281 SW 33RD ST 5281 SW 33RD ST Address: Address: City-St-Zip: OCALA, FL 34474 City-St-Zip: OCALA, FL 34474 US Title: () Delete Title: (X) Change () Addition Name: LYNCH, FRANCIS Name: LYNCH, FRANCIS 5281 SW33RD ST 5281 SW33RD ST Address: Address: City-St-Zip: OCALA, FL 34474 City-St-Zip: OCALA, FL 34474 US Title: () Delete Title: () Change (X) Addition LYNCH, MICHAEL F Name: Name: 5281 SW 33RD ST

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.

Address:

City-St-Zip:

OCALA, FL 34474 US

SIGNATURE: FRANCIS LYNCH 02/05/2009