

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000006590

Entity Name: DOUBLERIDGE, LLC

**FILED**  
**Mar 18, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

% DAVID A HOLMES  
99 NESBIT ST  
PINTA GORDA, FL 33950

## **New Principal Place of Business:**

C/O DAVID A HOLMES  
99 NESBIT ST  
PINTA GORDA, FL 33950

## **Current Mailing Address:**

% DAVID A HOLMES  
99 NESBIT ST  
PINTA GORDA, FL 33950

## **New Mailing Address:**

C/O DAVID A HOLMES  
99 NESBIT ST  
PINTA GORDA, FL 33950

FEI Number: 26-4195703

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

HOLMES, DAVID A  
FARR, FARR, EMERICH, HACKETT AND CARR, PA  
99 NESBIT ST  
PINTA GORDA, FL 33950 US

## **Name and Address of New Registered Agent:**

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:**

Title: MGR  
Name: FREDRICKSON, JAY  
Address: 2412 SIERRA LANE  
City-St-Zip: PUNTA GORDA, FL 33950 UD

I hereby 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: JAY FREDRICKSON

MGR

03/18/2011

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