

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000006762

Entity Name: LAKE RIDGE, L.L.C.

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

301 SE 19 STREET
FORT LAUDERDALE, FL 33316

New Principal Place of Business:

Current Mailing Address:

301 SE 19 STREET
FORT LAUDERDALE, FL 33316

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTOS, MIKE
319 SE 19TH ST.
FORT LAUDERDALE, FL 33316 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/MEMBERS:

Title: MGRM () Delete
Name: MARTOS, MIKE
Address: 301 SE 19 STREET
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: MGRM () Delete
Name: NASH, JOHN
Address: 301 SE 19 STREET
City-St-Zip: FORT LAUDERDALE, FL 33316

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

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MARTOS, MIKE A
Address: 301 SE 19 STREET
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: MGRM (X) Change () Addition
Name: NASH, JOHN C
Address: 301 SE 19 STREET
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: MGRM () Change (X) Addition
Name: KRAVER, SCOTT K MR
Address: 301 SE 19 STREET
City-St-Zip: FORT LAUDERDALE, FL 33316

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOHN C. NASH

MGRM

04/29/2005

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