## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED May 03, 2007 8:00 am Secretary of State

04-20-2007 90032 041 \*\*\*\*50.00

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5111 RIDGEWOOD, LLC

**DOCUMENT # M05000005726** 

Principal Place of Business
5111 COUTH PIDCEWIOOD AVE #300

5111 SOUTH RIDGEWOOD AVE., #300 PORT ORANGE, FL 32127

Mailing Address

5111 SOUTH RIDGEWOOD AVE., #300 PORT ORANGE. FL 32127

CR2E083 (11/05)

## DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

--- 6. Name and Address of Current Registered Agent

 01222007 No Chg-LLC
 CR2E083 (11/05)

 4. FEI Number
 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

CLARK, ANDREW D MGR 5111 S. RIDGEWOOD AVE SUITE 300 PORT ORANGE, FL 32127

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

8. The above named entity putmits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent					
	Signature, typed or printed name	I registered agent and title II applicable.	(NOTE: Registered Agent signifiture required when reinstating)	DATE	
Filing Fee is \$50.00 Due by May 1, 2007					
9.	MANA	GING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CLARK, D. ANDREV 5111 SOUTH RIDGE PORT ORANGE, FL	EWOOD AVE., #300			
TITLE RAME STREET ADDRESS COTY-ST-ZIP					
TITLE			i		
MAINE STREET ACCORESS	Į				
CUA-21-SIS			l DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZP			IN T	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				Į.	
TITLE NAME STREET ADDRESS CATY-ST-ZIP					
11. I hereby certify that the information supplied with this filing does not quality for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true end accurate and that my signature shall have the same legal effect as if made under cent; that I am a managing member or manager of the.					