

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000122851

Entity Name: RIDGELINE 239, INC.

FILED
Apr 27, 2007
Secretary of State

Current Principal Place of Business:

13848 HARBOR CREEK PLACE
JACKSONVILLE, FL 32244 US

New Principal Place of Business:

13848 HARBOR CREEK PLACE
JACKSONVILLE, FL 32224 US

Current Mailing Address:

13848 HARBOR CREEK PLACE
JACKSONVILLE, FL 32244 US

New Mailing Address:

239 WOLF PEN ROAD
OLD FORT, NC 28762 US

FEI Number: 20-8724150

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REINSCH, MARK A
2700 LAKE SHORE BLVD.
JACKSONVILLE, FL 32210 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ANDREATTA, RICHARD G
Address: 13848 HARBOR CREEK PLACE
City-St-Zip: JACKSONVILLE, FL 32244

Title: VPSD () Delete
Name: ANDREATTA, KIMBERLY J
Address: 13848 HARBOR CREEK PLACE
City-St-Zip: JACKSONVILLE, FL 32244

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ANDREATTA, RICHARD G
Address: 13848 HARBOR CREEK PLACE
City-St-Zip: JACKSONVILLE, FL 32224

Title: VPSD (X) Change () Addition
Name: ANDREATTA, KIMBERLY S
Address: 13848 HARBOR CREEK PLACE
City-St-Zip: JACKSONVILLE, FL 32224

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KIMBERLY S. ANDREATTA

VPSD

04/27/2007

Electronic Signature of Signing Officer or Director

Date