

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000093171

**Entity Name:** OSPREY RIDGE LLC

**Current Principal Place of Business:**

P.O. BOX 533856  
ORLANDO, FL 32853

**Current Mailing Address:**

P.O. BOX 533856  
ORLANDO, FL 32853 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

BARBOUR, ELAINE A  
425 N. ORANGE AVE  
ORLANDO, FL 32801 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

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	BARBOUR, ELAINE A	Name	GOODBREAD, MIKE W
Address	P.O. BOX 533856	Address	P.O. BOX 533856
City-State-Zip:	ORLANDO FL 32853	City-State-Zip:	ORLANDO FL 32853

*I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ELAINE A. BARBOUR

MGMBR

02/17/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date