

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000150686

Entity Name: NEXT RIDGE LINE OVER LLC**Current Principal Place of Business:**10859 BREAKING ROCKS DRIVE
TAMPA, FL 33647**Current Mailing Address:**10859 BREAKING ROCKS DRIVE
TAMPA, FL 33647**FEI Number:** 83-0965670**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**BLACKBURN, PERRY W JR
10859 BREAKING ROCKS DRIVE
TAMPA, FL 33647 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
Name	BLACKBURN, CONSTANCE T
Address	10859 BREAKING ROCKS DRIVE
City-State-Zip:	TAMPA FL 33647

Title	COO
Name	BLACKBURN, PERRY W III
Address	10859 BREAKING ROCKS DRIVE
City-State-Zip:	TAMPA FL 33647

Title	MGR
Name	BLACKBURN, VICTOR R
Address	10859 BREAKING ROCKS DRIVE
City-State-Zip:	TAMPA FL 33647

Title	MGR
Name	BLACKBURN-RAMER, STORMIE C
Address	269 SOUTH PICKETT STREET
City-State-Zip:	ALEXANDRIA VA 22304

Title	MGR
Name	BLACKBURN, BREANNA C
Address	10859 BREAKING ROCKS DRIVE
City-State-Zip:	TAMPA FL 33647

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: PERRY BLACKBURN**AGENT****03/22/2022**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date