## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L02000001276

Entity Name: 11-2001 LLC

Address:

City-St-Zip:

3333 N. MAIN ST.

JACKSONVILLE, FL 32206

FILED Jul 08, 2008 Secretary of State

Current Principal Place of Business:		New Principal I	New Principal Place of Business:	
	RTH MAIN ST. IVILLE, FL 32206			
Current Mailing Address:		New Mailing Ac	New Mailing Address:	
3333 N. M. JACKSON	AIN ST. IVILLE, FL 32206			
In accordan	r: 30-0032913 FEI Number Applied For ( nce with s. 607.193(2)(b), F.S., the limited liabil d Address of Current Registered Age	ity company did not receive the prior		
The above	AIN ST. IVILLE, FL 32206 US and an analysis of the statement for t	r the purpose of changing its reg	istered office or registered agent, or both	
SIGNATUI	e of Florida. RE·			
SICINATO	Electronic Signature of Registere	ed Agent	Date	
MANAGING MEMBERS/MANAGERS:		-	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGRM () Delete KAZRAN, SAM 3333 N. MAIN ST. JACKSONVILLE, FL 32206	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () Delete FARID, JOSHUA F 3333 N. MAIN ST. JACKSONVILLE, FL 32206	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	T () Delete LEPHART, GAYLE 3333 N. MAIN ST. JACKSONVILLE, FL 32206	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	VP ( ) Delete ASKARIFAR, ARAM	Title: Name:	( ) Change ( ) Addition	

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 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.

Address:

City-St-Zip:

SIGNATURE: SAM KAZRAN MGR 07/08/2008