## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L03000011102

Entity Name: OCEAN 11,LLC

City-St-Zip:

FILED Feb 11, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2849 SW BRIGHTON WAY PALM CITY, FL 34990 **Current Mailing Address: New Mailing Address:** 2849 SW BRIGHTON WAY PALM CITY, FL 34990 US FEI Number: 80-0063721 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WAGNER, ROBERT J 2849 SW BRIGHTON WAY PALM CITY, FL 34990 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 MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete WAGNER, ROBERT J Name: Name: 2849 SW BRIGHTON WAY Address: Address: City-St-Zip: PALM CITY, FL 34990 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: WAGNER, BETH P Name: Address: 2849 SW BRIGHTON WAY Address: City-St-Zip: PALM CITY, FL 34990 US City-St-Zip: MGR Title: () Delete Title: ( ) Change (X) Addition WAGNER, JUSTIN R Name: Name: Address: Address: 2849 SW BRIGHTON WAY City-St-Zip: City-St-Zip: PALM CITY, FL 34990 Title: () Delete Title: MGR ( ) Change (X) Addition Name: Name: WAGNER, ROYCE B 2849 SW BRIGHTON WAY Address: Address: City-St-Zip: City-St-Zip: PALM CITY, FL 34990 Title: () Delete Title: MGR ( ) Change (X) Addition WAGNER, BLAKE H Name: Name: 2849 SW BRIGHTON WAY Address: Address:

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.

City-St-Zip:

PALM CITY, FL 34990

SIGNATURE: ROBERT J WAGNER MGRM 02/11/2009