

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000035885

Entity Name: 685/SUITE 202, LLC

**FILED**  
**Feb 08, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

685 ROYAL PALM BEACH BLVD.  
SUITE 202  
ROYAL PALM BEACH, FL 33411 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O DAVID FEUER  
757 HARBOUR ISLES PLACE  
NORTH PALM BEACH, FL 33410 US

**New Mailing Address:**

FEI Number: 04-3793163

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FEUER, DAVID D  
757 HARBOUR ISLES PLACE  
NORTH PALM BEACH, FL 33410 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: FEUER, DAVID D  
Address: 757 HARBOUR ISLES PLACE  
City-St-Zip: NORTH PALM BEACH, FL 33410

Title: MGRM  
Name: FEUER, SUSAN G  
Address: 757 HARBOUR ISLES PLACE  
City-St-Zip: NORTH PALM BEACH, FL 33410

I hereby 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.

SIGNATURE: DAVID D. FEUER

MMBR

02/08/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date