

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000095812

**FILED**  
**Mar 21, 2011**  
**Secretary of State**

**Entity Name:** BEAUVOIR FINANCIAL SOLUTIONS, P.L.

**Current Principal Place of Business:**

5000 SAWGRASS VILLAGE CIRCLE, SUITE 6  
PONTE VEDRA BEACH, FL 32082

**New Principal Place of Business:**

6817 SOUTHPOINT PARKWAY  
SUITE 604  
JACKSONVILLE, FL 32216

**Current Mailing Address:**

5000 SAWGRASS VILLAGE CIRCLE, SUITE 6  
PONTE VEDRA BEACH, FL 32082

**New Mailing Address:**

6817 SOUTHPOINT PARKWAY  
SUITE 604  
JACKSONVILLE, FL 32216

**FEI Number:** 26-1131759

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

OUREDNIK, KAREL IV  
5000 SAWGRASS VILLAGE CIRCLE  
SUITE 6  
PONTE VEDRA BEACH, FL 32082 US

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

OUREDNIK, KAREL IV  
6817 SOUTHPOINT PARKWAY  
SUITE 604  
JACKSONVILLE, FL 32216 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

03/21/2011

Date

**MANAGING MEMBERS/MANAGERS:**

Title: P  
Name: HAYWORTH, JOSEPH A III  
Address: 6817 SOUTHPOINT PARKWAY  
City-St-Zip: JACKSONVILLE, FL 32216

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: JOSEPH A. HAYWORTH III

P

03/21/2011

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