

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000045898

Entity Name: 1100, LLC

FILED
Apr 23, 2009
Secretary of State

Current Principal Place of Business:

1200 PLANTATION ISLAND DR, SUITE 120
ST. AUGUSTINE, FL 32080

New Principal Place of Business:

Current Mailing Address:

1200 PLANTATION ISLAND DR, SUITE 120
ST. AUGUSTINE, FL 32080

New Mailing Address:

FEI Number: 75-3241516

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARDY, RICHARD L
1200 PLANTATION ISLAND DR, SUITE 120
ST. AUGUSTINE, FL 32080 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 () Delete
Name: BARNARD, THOMAS A
Address: 2639 OAK STREET
City-St-Zip: JACKSONVILLE, FL 32204

Title: MGRM () Delete
Name: DUNN, WILLIAM J
Address: 2639 OAK STREET
City-St-Zip: JACKSONVILLE, FL 32204

Title: MGRM () Delete
Name: MAVROFRIDES, ELIAS C
Address: 2639 OAK STREET
City-St-Zip: JACKSONVILLE, FL 32204

Title: MGRM () Delete
Name: MORENO, RUAL J
Address: 2639 OAK STREET
City-St-Zip: JACKSONVILLE, FL 32204

Title: MGRM () Delete
Name: STAMAN, JAMES A
Address: 2639 OAK STREET
City-St-Zip: JACKSONVILLE, FL 32204

Title: MGRM () Delete
Name: SULLIVAN, JOHN P
Address: 2639 OAK STREET
City-St-Zip: JACKSONVILLE, FL 32204

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: RICHARD L HARDY

MGRM

04/23/2009

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