

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000002503

Entity Name: 1711, L.L.C.

FILED
Jul 03, 2007
Secretary of State

Current Principal Place of Business:

1000 WOOD HAVEN LANE SW
VERO BEACH, FL 32962

New Principal Place of Business:

Current Mailing Address:

1000 WOOD HAVEN LANE SW
VERO BEACH, FL 32962

New Mailing Address:

FEI Number: 04-3612017 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

O'NEILL, EUGENE J ESQ.
979 BEACHLAND BLVD.
VERO BEACH, FL 32963 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

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BARRIE, JOHN
Address: 1000 WOOD HAVEN LANE SW
City-St-Zip: VERO BEACH, FL 32962

Title: MGR () Delete
Name: LUE, JANE
Address: 1298 40THCT SW
City-St-Zip: VERO BEACH, FL 32962

Title: MGR () Delete
Name: REINHARD, RAY
Address: 398 FARLEYS CT
City-St-Zip: VERO BEACH, FL 32968

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:

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: JANE E LUE

MGR

07/03/2007

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