

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000002661

Entity Name: A-110 ENTERPRISES, LLC

FILED  
Apr 29, 2009  
Secretary of State

## Current Principal Place of Business:

1801 S.E. HILLMOOR DRIVE  
PORT ST. LUCIE, FL 34952

## New Principal Place of Business:

1801 S.E. HILLMOOR DRIVE  
SUITE A-110  
PORT ST. LUCIE, FL 34952

## Current Mailing Address:

1801 S.E. HILLMOOR DRIVE  
PORT ST. LUCIE, FL 34952

## New Mailing Address:

1801 S.E. HILLMOOR DRIVE  
SUITE A-110  
PORT ST. LUCIE, FL 34952

FEI Number: 04-3617207

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

TURNER, JOHN A  
BUCKINGHAM, DOLITTLE & BURROUGHS  
515 N FLAGLER DR  
WEST PALM BEACH, FL 33401 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: HOFFMAN, DONALD JR MD  
Address: 1801 SE HILLMOOR DR STE A110  
City-St-Zip: PORT SAINT LUCIE, FL 34952

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: HOFFMAN, DONALD B JR MD  
Address: 1801 SE HILLMOOR DR STE A110  
City-St-Zip: PORT SAINT LUCIE, FL 34952 US

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: DONALD B HOFFMAN, JR MD

MGRM

04/29/2009

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