



2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 24, 2004 8:00 am
Secretary of State

03-24-2004 90300 029 ****50.00

DOCUMENT # L03000018408 1. Entity Name SEVEN ELEVEN COURT, LLC					
Principal Place of Business 405 FIFTH AVENUE SOUTH STE. 7 NAPLES, FL 34102			Mailing Address 405 FIFTH AVENUE SOUTH STE. 7 NAPLES, FL 34102		
2. Principal Place of Business 300 Fifth Ave. South Suite, Apt. #, etc. 227 Naples, FL. Zip 34102 Country USA		3. Mailing Address 300 Fifth Ave South Suite, Apt. #, etc. 227 Naples, FL Zip 34102 Country USA			
03182004 Chg-LLC CR2E083 (10/03)				4. FEI Number SC-2360453	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent ELLIOTT, BRIAN M 300 FIFTH AVENUE SOUTH, STE. 227 NAPLES, FL 34102			7. Name and Address of New Registered Agent Name ELLIOTT, BRIAN M Street Address (P.O. Box Number is Not Acceptable) 300 FIFTH AVENUE SOUTH # 227 City NAPLES FL Zip Code 34102		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Brian M. Elliott BRIAN M ELLIOTT 3-18-04 <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$50.00 Due by May 1, 2004		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Brian M. Elliott BRIAN M. ELLIOTT 3-18-04 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>			Date 239649-0006 <small>Daytime Phone #</small>		