

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000074514

**FILED**  
**Jan 11, 2011**  
**Secretary of State**

**Entity Name:** HAMMOCKS BREVARD, LLC

**Current Principal Place of Business:**

320 NORTH ATLANTIC AVENUE, 4A  
COCOA BEACH, FL 32931

**New Principal Place of Business:**

1835 S ATLANTIC AVE  
704  
COCOA BEACH, FL 32931

**Current Mailing Address:**

P.O. BOX 321395  
COCOA BEACH, FL 32932

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

SOILEAU, JOHN L  
3490 NORTH US HIGHWAY 1  
COCOA, FL 32926 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  
Name: DALY, PAUL  
Address: P.O. BOX 321395  
City-St-Zip: COCOA BEACH, FL 32932

Title: MGRM  
Name: BALLEW, DON  
Address: P.O. BOX 321395  
City-St-Zip: COCOA BEACH, FL 32932

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: DON BALLEW

MGRM

01/11/2011

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