

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000000318

Entity Name: FOXPOINTE, LLC

**FILED**  
**Jan 10, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

2740 S.W. MARTIN DOWNS BLVD.  
# 301  
PALM CITY, FL 34990

**New Principal Place of Business:**

**Current Mailing Address:**

2740 S.W. MARTIN DOWNS BLVD.  
# 301  
PALM CITY, FL 34990

**New Mailing Address:**

FEI Number: 20-2135192

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VAN EERDE, DENISE A  
2740 S.W. MARTIN DOWNS BLVD.  
# 301  
PALM CITY, FL 34990 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: VAN EERDE, DENISE A  
Address: 2740 S.W. MARTIN DOWNS BLVD. #301  
City-St-Zip: PALM CITY, FL 34990

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: DENISE A VAN EERDE

MGRM

01/10/2011

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