

**2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000031764

**FILED  
Jan 08, 2011  
Secretary of State**

**Entity Name:** ECLIPSE, LLC

**Current Principal Place of Business:**

700 NE 34TH ST  
BOCA RATON, FL 33431

**New Principal Place of Business:**

**Current Mailing Address:**

700 NE 34TH ST  
BOCA RATON, FL 33431

**New Mailing Address:**

**FEI Number:** 65-0534738      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SOVIERO, ANTHONY C  
138 NORTH SWINTON AVENUE  
DELRAY BEACH, FL 33444 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:** GYORFFY, ZOLTAN  
**Address:** 123 NE 1ST AVENUE  
**City-St-Zip:** DELRAY BEACH, FL 33444

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: ZOLTAN GYORFFY      MGRM      01/08/2011

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