

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000037802

FILED
Apr 13, 2009
Secretary of State

Entity Name: 925 SE 11TH AVENUE, L.L.C.

Current Principal Place of Business:

2018 S.E. 21ST STREET
CAPE CORAL, FL 33990

New Principal Place of Business:

Current Mailing Address:

2018 S.E. 21ST STREET
CAPE CORAL, FL 33990

New Mailing Address:

FEI Number: 20-2711126

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLOW, DALE
2018 S.E. 21ST STREET
CAPE CORAL, FL 33990 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: MGR () Delete
Name: BLOW, DALE A
Address: 2018 S.E. 21ST STREET
City-St-Zip: CAPE CORAL, FL 33990

Title: MGR () Delete
Name: BLOW, JON M
Address: 7 OREGON AVENUE
City-St-Zip: OLD ORCHARD BEACH, ME 04064

Title: MGR () Delete
Name: ROBERT M. DE RUPO, P.A.
Address: 2219 S.E. 10TH LANE
City-St-Zip: CAPE CORAL, FL 33990

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: BLOW, JON M
Address: 2208 SW 14TH PLACE
City-St-Zip: CAPE CORAL, FL 33991

Title: MGR (X) Change () Addition
Name: JAMES BLOW
Address: 107 BERRY ROAD
City-St-Zip: SACO, ME 04072

Title: MGR () Change (X) Addition
Name: STEVEN BLOW
Address: 105 BERRY ROAD
City-St-Zip: SACO, ME 04072

Title: MGR () Change (X) Addition
Name: FRANK BLOW
Address: 1806 SE 19TH LANE
City-St-Zip: CAPE CORAL, FL 33990

Title: MGR () Change (X) Addition
Name: J-D HOLDINGS INC.
Address: 2018 SE 21ST STREET
City-St-Zip: CAPE CORAL, FL 33990

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: DALE A. BLOW

MGR

04/13/2009

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