

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000063300

Entity Name: ST. LUCIE LOCKS LLC

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1679 BREAKERS WEST BOULEVARD  
WEST PALM BEACH, FL 33411

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 211087  
WEST PALM BEACH, FL 33421

**New Mailing Address:**

FEI Number: 20-3058517

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MENOTTE, DEBORAH C TRUSTEE  
1679 BREAKERS WEST BOULEVARD  
WEST PALM BEACH, FL 33411 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: MENOTTE, DEBORAH C TRUSTEE  
Address: 1679 BREAKERS WEST BOULEVARD  
City-St-Zip: WEST PALM BEACH, FL 33411

Title: MGR  
Name: DAVIS, RYAN  
Address: 8468 112TH TERR N  
City-St-Zip: WEST PALM BEACH, FL 33412

Title: MGR  
Name: PUZZITIELLO, RAYMOND  
Address: 2143 UNION ST  
City-St-Zip: WEST PALM BEACH, FL 33411

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: DEBORAH C. MENOTTE, TRUSTEE

MGRM

04/28/2011

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