

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000067281

FILED
Mar 29, 2010
Secretary of State

Entity Name: 11511 WEST CLAYTON DRIVE, LLC

Current Principal Place of Business:

313 CYPRESS STREET
FLAGLER BEACH, FL 32136

New Principal Place of Business:

Current Mailing Address:

313 CYPRESS STREET
FLAGLER BEACH, FL 32136

New Mailing Address:

FEI Number: 54-0259290

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIVINGSTON, WILLIAM I
313 CYPRESS STREET
FLAGLER BEACH, FL 32136 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: LIVINGSTON, WILLIAM I
Address: 313 CYPRESS STREET
City-St-Zip: FLAGLER BEACH, FL 32136

Title: MGRM
Name: LIVINGSTON, RUTH C
Address: 313 CYPRESS STREET
City-St-Zip: FLAGLER BEACH, FL 32136

Title: MGRM
Name: PRICE, RON A
Address: 96 CYPRESS BOULEVARD WEST
City-St-Zip: HOMOSASSA, FL 34446

Title: MGRM
Name: PRICE, CORAL A
Address: 96 CYPRESS BOULEVARD WEST
City-St-Zip: HOMOSASSA, FL 34446

Title: MGRM
Name: SNELL, FREDERICK J JR.
Address: 6210 W. CORPORATE OAKS DRIVE
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: MGRM
Name: SNELL, JULIE B
Address: 6210 W. CORPORATE OAKS DRIVE
City-St-Zip: CRYSTAL RIVER, FL 34429

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: RUTH C. LIVINGSTON

MGRM

03/29/2010

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