

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000083136

**FILED**  
**Apr 06, 2012**  
**Secretary of State**

**Entity Name:** ELEVEN OAKS ENTERPRISES, LLC

**Current Principal Place of Business:**

4920 STATE ROAD 11  
DELEON SPRINGS, FL 32130

**New Principal Place of Business:**

**Current Mailing Address:**

4920 STATE ROAD 11  
DELEON SPRINGS, FL 32130

**New Mailing Address:**

**FEI Number:** 20-3348224

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SMITH, HORACE JR.  
444 SEABREEZE BLVD., SUITE 900  
DAYTONA BEACH, FL 32118 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  
**Name:** HUCKS, DANIEL P  
**Address:** 4920 STATE ROAD 11  
**City-St-Zip:** DELEON SPRINGS, FL 32130

**Title:** MGR  
**Name:** HUCKS, LYNDIA M  
**Address:** 4920 STATE ROAD 11  
**City-St-Zip:** DELEON SPRINGS, FL 32130

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:** DANIEL P. HUCKS

MGR

04/06/2012

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