

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000008060

Entity Name: INNOVATIVE JV XI, LLC

FILED
Apr 26, 2007
Secretary of State

Current Principal Place of Business:

6945 SUNNYBROOK BOULEVARD
ENGLEWOOD, FL 342248424

New Principal Place of Business:

1600 TAMIAMI TRAIL
SUITE 200
PORT CHARLOTTE, FL 33948

Current Mailing Address:

1600 TAMIAMI TRAIL SUITE 200
PORT CHARLOTTE, FL 33948

New Mailing Address:

1600 TAMIAMI TRAIL
SUITE 200
PORT CHARLOTTE, FL 33948

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WAGNER, E. JOHN II
200 SOUTH ORANGE AVENUE
SARASOTA, FL 34236 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: OTERO, YHOVANNI
Address: 6945 SUNNYBROOK BOULEVARD
City-St-Zip: ENGLEWOOD, FL 342248424

Title: MGR () Delete
Name: OTERO, OSVALDO F
Address: 6945 SUNNYBROOK BOULEVARD
City-St-Zip: ENGLEWOOD, FL 342248424

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: OTERO, YHOVANNI
Address: 1600 TAMIAMI TRAIL, SUITE 200
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: MGR (X) Change () Addition
Name: OTERO, OSVALDO F
Address: 1600 TAMIAMI TRAIL, SUITE 200
City-St-Zip: PORT CHARLOTTE, FL 33948

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: OSVALDO F. OTERO

MGR

04/26/2007

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