

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000030641

**FILED**  
**Apr 21, 2010**  
**Secretary of State**

**Entity Name:** LOXAHATCHEE ISLAND, LLC

**Current Principal Place of Business:**

3950 RCA BLVD., #5000  
PALM BEACH GARDENS, FL 33410

**New Principal Place of Business:**

3910 RCA BLVD SUITE 1015  
PALM BEACH GARDENS, FL 33410

**Current Mailing Address:**

3950 RCA BLVD., #5000  
PALM BEACH GARDENS, FL 33410

**New Mailing Address:**

3910 RCA BLVD SUITE 1015  
PALM BEACH GARDENS, FL 33410

**FEI Number:** 20-4776073

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GARY, JOHN W III  
701 U.S. HWY. ONE, STE. 402  
N. PALM BEACH, FL 33408 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:** BILLS, JOHN C  
**Address:** 3910 RCA BLVD SUITE 1015  
**City-St-Zip:** PALM BEACH GARDENS, FL 33410

**Title:** MGRM  
**Name:** BILLS, JOHN CLARK  
**Address:** 3910 RCA BLVD SUITE 1015  
**City-St-Zip:** PALM BEACH GARDENS, FL 33410

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:** JOHN CLARK BILLS

MGRM

04/21/2010

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