2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 23, 2009
Secretary of State

DOCUMENT# L07000045898

Entity Name: 1100, LLC

Current Principal Place of Business:

1200 PLANTATION ISLAND DR, SUITE 120
ST. AUGUSTINE, FL 32080

New Principal Place of Business:

Current Mailing Address:

1200 PLANTATION ISLAND DR, SUITE 120
ST. AUGUSTINE, FL 32080

New Mailing Address:

FEI Number: 75-3241516 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HARDY, RICHARD L
1200 PLANTATION ISLAND DR, SUITE 120
ST. AUGUSTINE, FL 32080 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	( ) Delete
Name:	BARNARD, THOMAS A	
Address:	2639 OAK STREET	
City-St-Zip:	JACKSONVILLE, FL 32204	
Title:	MGRM	( ) Delete
Name:	DUNN, WILLIAM J	
Address:	2639 OAK STREET	
City-St-Zip:	JACKSONVILLE, FL 32204	
Title:	MGRM	( ) Delete
Name:	MAVROFRIDES, ELIAS C	
Address:	2639 OAK STREET	
City-St-Zip:	JACKSONVILLE, FL 32204	
Title:	MGRM	( ) Delete
Name:	MORENO, RUAL J	
Address:	2639 OAK STREET	
City-St-Zip:	JACKSONVILLE, FL 32204	
Title:	MGRM	( ) Delete
Name:	STAMAN, JAMES A	
Address:	2639 OAK STREET	
City-St-Zip:	JACKSONVILLE, FL 32204	
Title:	MGRM	( ) Delete
Name:	SULLIVAN, JOHN P	
Address:	2639 OAK STREET	
City-St-Zip:	JACKSONVILLE, FL 32204	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: RICHARD L HARDY MGRM 04/23/2009

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