

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000088588

Entity Name: 2675 GRAMPIAN, LLC

**FILED**  
**Apr 19, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

8614 EMERALD ISLE CIRCLE NORTH  
JACKSONVILLE, FL 32216

**New Principal Place of Business:**

142 CATTAIL CIR  
ST JOHNS, FL 32259

**Current Mailing Address:**

P.O. BOX 16433  
JACKSONVILLE, FL 32245

**New Mailing Address:**

P.O. BOX 600605  
JACKSONVILLE, FL 32260

FEI Number: 26-0806622

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

O'NEILL, CONNIE C  
8614 EMERALD ISLE CIRCLE NORTH  
JACKSONVILLE, FL 32216 US

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

O'NEILL, CONNIE C  
142 CATTAIL CIR  
ST JOHNS, FL 32259 US

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:

04/19/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: O'NEILL, CONNIE C  
Address: P.O. BOX 600605  
City-St-Zip: JACKSONVILLE, FL 32260

Title: MGRM  
Name: O'NEILL, SEAN P  
Address: P.O. BOX 600605  
City-St-Zip: JACKSONVILLE, FL 32260

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: CONNIE C O'NEILL

MGRM

04/19/2011

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