

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000123132

**FILED**  
**Jun 13, 2011**  
**Secretary of State**

**Entity Name:** JAX BEACH SEAFOOD DEPOT, LLC

**Current Principal Place of Business:**

120 S 3RD ST  
JACKSONVILLE BEACH, FL 32250

**New Principal Place of Business:**

**Current Mailing Address:**

320 1ST STREET NORTH  
#803  
JACKSONVILLE BEACH, FL 32250

**New Mailing Address:**

120 S 3RD ST  
JACKSONVILLE BEACH, FL 32250

**FEI Number:** 26-1555549

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ARTEAGA, JASON DRAKE  
320 1ST STREET NORTH  
#803  
JACKSONVILLE BEACH, FL 32250 US

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

ARTEAGA, JASON DRAKE  
120 S 3RD STREET  
JACKSONVILLE BEACH, FL 32250 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: JASON D ARTEAGA

06/13/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ARTEAGA, JASON DRAKE  
Address: 5015 DEGROVE ROAD  
City-St-Zip: JAX, FL 32207

Title: MGRM  
Name: SHULER, JOHN F  
Address: 707 S 1ST STREET, #503  
City-St-Zip: JACKSONVILLE BCH, FL 32250

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: JASON D ARTEAGA

MGRM

06/13/2011

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