

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000125768

Entity Name: 671 ADDIE, LLC

FILED  
Apr 21, 2011  
Secretary of State

## Current Principal Place of Business:

511 SW PORT ST. LUCIE BLVD.  
PORT ST. LUCIE, FL 34953 US

## New Principal Place of Business:

## Current Mailing Address:

511 SW PORT ST. LUCIE BLVD.  
PORT ST. LUCIE, FL 34953 US

## New Mailing Address:

FEI Number: 26-1602795

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

GROZA, JOHN A  
511 SW PORT ST. LUCIE BLVD.  
PORT ST. LUCIE, FL 34953 US

## Name and Address of New Registered Agent:

GROZA, JOHN A  
1417 SW OSPREY COVE  
PORT ST. LUCIE, FL 34986 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:

04/21/2011

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM  
Name: GROZA, JOHN A  
Address: 1417 SW OSPREY COVE  
City-St-Zip: PORT ST. LUCIE, FL 34986 US

Title: MGRM  
Name: GROZA, PATRICIA A  
Address: 1417 SW OSPREY COVE  
City-St-Zip: PORT ST. LUCIE, FL 34986 US

Title: MGRM  
Name: GROZA, JOHN ANTHONY  
Address: 2062 SW HAMPSHIRE LANE  
City-St-Zip: PORT SAINT LUCIE, FL 34953 US

Title: MGRM  
Name: SZARY, NICOLIA C  
Address: 1326 SW BRIARWOOD DR  
City-St-Zip: PORT SAINT LUCIE, FL 34986 US

Title: MGRM  
Name: LYONS, ANGELIQUE  
Address: 1306 SW MAPLEWOOD DRIVE  
City-St-Zip: PORT SAINT LUCIE, FL 34986 US

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: PATRICIA A GROZA

MGRM

04/21/2011

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