

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000073356

**FILED**  
**Jan 10, 2010**  
**Secretary of State**

**Entity Name:** 11TH HOUR, LIMITED LIABILITY COMPANY

**Current Principal Place of Business:**

3526 SHELDRAKE DRIVE  
JACKSONVILLE, FL 32223 US

**New Principal Place of Business:**

**Current Mailing Address:**

3526 SHELDRAKE DRIVE  
JACKSONVILLE, FL 32223 US

**New Mailing Address:**

445-26 STATE ROAD 13 NORTH  
#422  
JACKSONVILLE, FL 32259 US

**FEI Number:** 26-4173592

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ADAMS, KRISTEN  
3526 SHELDRAKE DRIVE  
JACKSONVILLE, FL 32223 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:** MGR  
**Name:** 11TH HOUR CORPORATION  
**Address:** 425 SUMMIT AVENUE  
**City-St-Zip:** WESTVILLE, NJ 08093 US

**Title:** MGRM  
**Name:** ADAMS, KRISTEN  
**Address:** 3526 SHELDRAKE DRIVE  
**City-St-Zip:** JACKSONVILLE, FL 32223

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:** KRISTEN ADAMS

MGRM

01/10/2010

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