

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000081067

**FILED**  
**Jan 30, 2011**  
**Secretary of State**

**Entity Name:** THE CATHERINE GROUP, LLC

**Current Principal Place of Business:**

8230 N DAMES POINT CROSSING BOULEVARD  
#1708  
JACKSONVILLE, FL 32277

**New Principal Place of Business:**

**Current Mailing Address:**

8230 N DAMES POINT CROSSING BOULEVARD  
#1708  
JACKSONVILLE, FL 32277

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

HEND, HILALI  
8230 DAMES POINT CROSSING BLVD  
SUITE 1708  
JACKSONVILLE, FL 32277 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: RAMADAN, DINA  
Address: 8230 N DAMES POINT CROSSING BLVD #1708  
City-St-Zip: JACKSONVILLE, FL 32277

Title: MGR  
Name: HILALI, HEND  
Address: 8230 N DAMES POINT CROSSING BLVD #1708  
City-St-Zip: JACKSONVILLE, FL 32277

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: D RAMADAN

MGR

01/30/2011

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