

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000012429

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

**Entity Name:** CHAZ & DONA OFFICE BUILDING, LLC

**Current Principal Place of Business:**

1300 PARK OF COMMERCE BLVD., SUITE 200  
DELRAY BEACH, FL 33445

**New Principal Place of Business:**

7601 N. FEDERAL HWY  
125B  
BOCA RATON, FL 33487

**Current Mailing Address:**

1300 PARK OF COMMERCE BLVD., SUITE 200  
DELRAY BEACH, FL 33445

**New Mailing Address:**

P.O. BOX 6428  
DELRAY BEACH, FL 33482

**FEI Number:** 20-4718512

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CABELA, CHAZ  
1300 PARK OF COMMERCE BLVD., SUITE 200  
DELRAY BEACH, FL 33445 US

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

CABELA, CHAZ  
7601 N. FEDERAL HWY  
125B  
BOCA RATON, FL 33487 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/19/2011

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: CABELA, CHAZ  
Address: P.O. BOX 6428  
City-St-Zip: DELRAY BEACH, FL 33482

Title: MGRM  
Name: CABELA, DONA  
Address: P.O. BOX 6428  
City-St-Zip: DELRAY BEACH, FL 33482

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: DONA CABELA

MGRM

04/19/2011

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