

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000020845

**FILED**  
**Apr 12, 2011**  
**Secretary of State**

**Entity Name:** 7925 SW CITRUS BOULEVARD, LLC

**Current Principal Place of Business:**

C/O ROSS EARLE & BONAN, P.A.  
759 S. FEDERAL HIGHWAY, SUITE 212  
STUART, FL 34994 US

**New Principal Place of Business:**

C/O ROSS EARLE & BONAN, P.A.  
789 S. FEDERAL HIGHWAY, SUITE 101  
STUART, FL 34994 US

**Current Mailing Address:**

C/O ROSS EARLE & BONAN, P.A.  
759 S. FEDERAL HIGHWAY, SUITE 212  
STUART, FL 34994 US

**New Mailing Address:**

C/O ROSS EARLE & BONAN, P.A.  
789 S. FEDERAL HIGHWAY, SUITE 101  
STUART, FL 34994 US

FEI Number: 61-1592388

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

EARLE, DAVID B ESQ.  
759 S. FEDERAL HIGHWAY, SUITE 212  
STUART, FL 34994 US

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

EARLE, DAVID B ESQ.  
789 S. FEDERAL HIGHWAY, SUITE 101  
STUART, FL 34994 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

04/12/2011

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MS  
Name: DAVIES, JILL E  
Address: 789 S. FEDERAL HIGHWAY, SUITE 101  
City-St-Zip: STUART, FL 34994 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: JILL E. DAVIES

MM

04/12/2011

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