2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 20, 2011
Secretary of State

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Entity Name: 443 SW KABOT AVE LLC

Current Principal Place of Business:

511 SW PORT SAINT LUCIE BLVD
PT ST LUCIE, FL 34953

New Principal Place of Business:

511 SW PORT SAINT LUCIE BLVD
PT ST LUCIE, FL 34953 US

Current Mailing Address:

511 SW PORT SAINT LUCIE BLVD
PT ST LUCIE, FL 34953

New Mailing Address:

511 SW PORT SAINT LUCIE BLVD
PT ST LUCIE, FL 34953 US

FEI Number: 26-4427815 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

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

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

Title: MGR
Name: GROZA, JOHN ANTHONY
Address: 2062 SW HAMPSHIRE LANE
City-St-Zip: PT. ST. LUCIE, FL 34953 US

Title: MGR
Name: SZARY, NICOLIA C
Address: 1326 SW BRIARWOOD DRIVE
City-St-Zip: PT. ST. LUCIE, FL 34986 US

Title: MGR
Name: LYONS, ANGELIQUE C
Address: 1306 SW MAPLEWOOD DRIVE
City-St-Zip: PT. ST. 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 Statues.

SIGNATURE: PATRICIA A GROZA MGRM 04/20/2011
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date