

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000022752

**FILED**  
**Mar 31, 2011**  
**Secretary of State**

**Entity Name:** ATLANTIC COAST INDUSTRIES OF NORTHERN FL, LLC

**Current Principal Place of Business:**

273 DONDANVILLE ROAD  
ST AUGUSTINE, FL 32080

**New Principal Place of Business:**

**Current Mailing Address:**

273 DONDANVILLE ROAD  
ST AUGUSTINE, FL 32080

**New Mailing Address:**

**FEI Number:** 27-2020493

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MOREL, DONALD F  
273 DONDANVILLE ROAD  
ST AUGUSTINE, FL 32080 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: MOREL, DONALD F  
Address: 273 DONDANVILLE ROAD  
City-St-Zip: ST AUGUSTINE, FL 32080

Title: MGRM  
Name: MOREL, STEPHANIE  
Address: 273 DONDANVILLE ROAD  
City-St-Zip: ST AUGUSTINE, FL 32080

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: DONALD F MOREL

PRES

03/31/2011

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