

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000060919

FILED
Mar 12, 2011
Secretary of State

Entity Name: OPTIMAL DUALITY INSTITUTE LLC

Current Principal Place of Business:

210 S WEDGEWOOD CIRCLE
ORMOND BEACH, FL 32176

New Principal Place of Business:

Current Mailing Address:

PO BOX 4102
ORMOND BEACH, FL 32175

New Mailing Address:

FEI Number: 27-2805021

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOLERJACK, DANIEL J CPA
42 S PENINSULA DR
DAYTONA BEACH, FL 32118 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: JEFFERSON, THOMAS
Address: 210 S WEDGEWOOD CIRCLE
City-St-Zip: ORMOND BEACH, FL 32176

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: THOMAS R JEFFERSON

MGRM

03/12/2011

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