2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004861

FOLEY, MICHAEL

7198 SLEPPY HOLLOW CIR

TALLAHASSEE, FL 32309

Name:

Address:

City-St-Zip:

FILED Apr 30, 2007 Secretary of State

Entity Nan	ne: STATION ELEVEN, INC.	
Current Pr	incipal Place of Business:	New Principal Place of Business:
	PY HOLLOW CIRCLE SSEE, FL 32312 US	201 WEST PARK AVE SUITE S-11 TALLAHASSEE, FL 32301 US
Current Ma	ailing Address:	New Mailing Address:
	PY HOLLOW CIRCLE SSEE, FL 32312 US	201 WEST PARK AVE SUITE S-11 TALLAHASSEE, FL 32301 US
FEI Number:	20-2816492 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()
Name and	Address of Current Registered Agent:	Name and Address of New Registered Agent:
	UANE A MBLEE ROAD SSEE, FL 32312 US	
The above in the State		urpose of changing its registered office or registered agent, or both,
SIGNATUR	RE:	
	Electronic Signature of Registered Age	ent Date
OFFICERS	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: Name: Address: City-St-Zip:	CEOD () Delete CRUMPACKER, WILLIAM J III 12030 CEDAR BLUFF TRL TALLAHASSEE, FL 32312 US	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	STD () Delete DAUNT, DUANE A 7198 SLEEPY HOLLOW CIRCLE TALLAHASSEE, FL 32309 US	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D () Delete HAVRILUK, MARY ANNE 3003 NORTH MERIDIAN ROAD TALLAHASSEE, FL 32312	Title: () Change () Addition Name: Address: City-St-Zip:
Title:	D () Delete	Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: DUANE DAUNT STD 04/30/2007