## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000004861

Name: STATION ELEVEN INC

FILED Apr 28, 2008 Secretary of State

Entity Nar	ne: STATION	ELEVEN, INC.			
Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
SUITE S-1	PARK AVE 1 SSEE, FL 3230	1 US			
	ailing Address		New Mailing Address	New Mailing Address:	
SUITE S-1	PARK AVE 1 SSEE, FL 3230	1 US			
FEI Number:	20-2816492	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of Co	urrent Registered Agent	: Name and Address of	Name and Address of New Registered Agent:	
DAUNT, DUANE A 7198 CHAMBLEE ROAD TALLAHASSEE, FL 32312 US				DAUNT, DUANE A 7198 SLEEPY HOLLOW CIRCLE TALLAHASSEE, FL 32312 US	
	named entity so e of Florida.	ubmits this statement for th	he purpose of changing its registered	d office or registered agent, or both,	
SIGNATURE: DUANE DAUNT				04/28/2008	
	Electroni	c Signature of Registered	Agent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CEOD () CRUMPACKER, 12030 CEDAR B TALLAHASSEE,	SLUFF TRL	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DAUNT, DUANE	OLLOW CIRCLE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () HAVRILUK, MAR 3003 NORTH ME TALLAHASSEE,	ERIDIAN ROAD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ()  FOLEY, MICHAE 7198 SLEPPY H TALLAHASSEE,	OLLOW CIR	Title: Name: Address: City-St-Zip:	( ) 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.

SIGNATURE: DUANE DAUNT STD 04/28/2008