

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000037802

Entity Name: 925 SE 11TH AVENUE, L.L.C.**Current Principal Place of Business:**2208 SW 14TH PLACE
CAPE CORAL, FL 33991**Current Mailing Address:**2208 SW 14TH PLACE
CAPE CORAL, FL 33991**FEI Number:** 20-2711126**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BLOW, JON M
2208 SW 14TH PLACE
CAPE CORAL, FL 33991 US*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**Authorized Person(s) Detail :**

Title	MGR
Name	BLOW, DALE A
Address	2018 S.E. 21ST STREET
City-State-Zip:	CAPE CORAL FL 33990

Title	MGR
Name	BLOW, JON M
Address	2208 SW 14TH PLACE
City-State-Zip:	CAPE CORAL FL 33991

Title	MGR
Name	JAMES BLOW
Address	107 BERRY ROAD
City-State-Zip:	SACO ME 04072

Title	MGR
Name	STEVEN BLOW
Address	105 BERRY ROAD
City-State-Zip:	SACO ME 04072

Title	MGR
Name	FRANK BLOW
Address	1806 SE 19TH LANE
City-State-Zip:	CAPE CORAL FL 33990

Title	MGR
Name	J-D HOLDINGS LLC.
Address	2208 SW 14TH PLACE
City-State-Zip:	CAPE CORAL FL 33991

I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JON BLOW

MGR

03/06/2014

Electronic Signature of Signing Authorized Person(s) Detail_____
Date