

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000000398

Entity Name: 1200 SOUTH MAIN STREET, LLC**Current Principal Place of Business:**1200 S MAIN ST
BELLE GLADE, FL 33430**Current Mailing Address:**1200 S MAIN ST
C/O MARTIN HARLAND, DO
BELLE GLADE, FL 33430 US**FEI Number:** 90-0001459**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**HARLAND, MICHAEL
1200 S MAIN ST
C/O MARTIN HARLAND, DO
BELLE GLADE, FL 33430 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:** BRIAN D. KENNEDY, MANAGER

03/08/2016

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGRM
Name	HARLAND, MARTIN T
Address	1200 S MAIN ST SUITE 200
City-State-Zip:	BELLE GLADE FL 33430
Title	DIR
Name	VENUGOPAL, CHANDRA
Address	1200 S MAIN ST SUITE 100A
City-State-Zip:	BELLE GLADE FL 33430
Title	DIR
Name	SHARMA, SEKHAR
Address	1200 S MAIN ST SUITE 100
City-State-Zip:	BELLE GLADE FL 33430

Title	DIR
Name	FOUCALD, JEAN
Address	1200 S MAIN ST SUITE 100
City-State-Zip:	BELLE GLADE FL 33430
Title	DIR
Name	VEDERE, AMARNATH
Address	1200 S MAIN ST SUITE 100A
City-State-Zip:	BELLE GLADE FL 33430
Title	DIR
Name	TRIPURANENI, KRISHNA
Address	1157 SOUTH STATE ROAD 7
City-State-Zip:	WELLINGTON FL 33414

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: MARTIN T HARLAND

MANAGING PARTNER

03/08/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date