

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000004874

**Entity Name:** 1 LYONS TECH PARKWAY, LLC**Current Principal Place of Business:**LYONS TECHNOLOGY PARK  
6850 LYONS TECHNOLOGY CIRCLE  
COCONUT CREEK, FL 33073**Current Mailing Address:**13190 TELFAIR AVE  
SYLMAR, CA 91342 US**FEI Number:** 51-0444598**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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	MGRM	Title	MGRM
Name	ZANGER, LEON MGRM	Name	ZANGER, JONATHAN MGRM
Address	456 ARDSLEY RD	Address	12 E 86TH ST
City-State-Zip:	SCARSDALE NY 10583	City-State-Zip:	NEW YORK NY 10028
Title	MGRM	Title	MGRM
Name	SPRINGER, CLAUDIA MGRM	Name	OLIVER, KURT MGRM
Address	PO BOX 448	Address	5410 NW 74TH PLACE
City-State-Zip:	GWYNEDD PA 19436	City-State-Zip:	COCONUT CREEK FL 33073
Title	MGRM	Title	MGR
Name	OLIVER, STELLA MGRM	Name	PETROCELLI, PAT MGR
Address	1443 NE 55TH ST	Address	13190 TELFAIR AVE
City-State-Zip:	FT LAUDERDALE FL	City-State-Zip:	SYLMAR CA 91342

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** PAT PETROCELLI

VP - CFO

01/24/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date