

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000031381

**Entity Name:** SPARTAN MANAGEMENT, LLC

**Current Principal Place of Business:**

400 NORTH MILLS AVENUE  
ORLANDO, FL 32803-5722

**Current Mailing Address:**

1415 SLIGH BLVD  
ORLANDO, FL 32806 US

**FEI Number:** 20-0169907

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MURBACH, ROGER SM.D.  
1449 KELSO BOULEVARD  
WINDERMERE, FL 34786-7515 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 D  
Name MURBACH, ROGER S  
Address 1449 KELSO BOULEVARD  
City-State-Zip: WINDERMERE FL 34786

Title D  
Name APPELBLATT, STEVE  
Address 1350 BENEVOLENT ST  
City-State-Zip: MAITLAND FL 32751

Title D  
Name STOCKTON, EDWARD  
Address 9062 POINT CYPRESS DR  
City-State-Zip: ORLANDO FL 32836

Title D  
Name GEWOLB, JAY  
Address 1759 COCOPLUM COURT  
City-State-Zip: LONGWOOD FL 32779

Title D  
Name SMITH, DAVID  
Address 9138 BAY POINT DRIVE  
City-State-Zip: ORLANDO FL 32819

Title D  
Name STEWART, MATTHEW  
Address 1922 BENHURST PLACE  
City-State-Zip: MAITLAND FL 32751

*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:** ROGER S. MURBACH

**REGISTERED AGENT**

**03/25/2015**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date