

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000012931

**Entity Name:** 1564 MAIN STREET, LLC

**Current Principal Place of Business:**

1564 MAIN ST  
SARASOTA, FL 34236

**Current Mailing Address:**

1564 MAIN ST  
SARASOTA, FL 34236 US

**FEI Number:** 11-3715142

**Certificate of Status Desired:** No

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

MASCI, CATHERINE R  
200 BISCAYNE BLVD WAY  
4502  
MIAMI, FL 33131 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 MASCI, GINO  
Address 200 BISCAYNE BLVD WAY #4502  
City-State-Zip: MIAMI FL 33131

Title MGR  
Name MASCI, CATHERINE R  
Address 6 FISH COVE RD  
City-State-Zip: SOUTHAMPTON NY 11968

Title MGR  
Name MASCI, FERNANDO  
Address 335 S. BISCAYNE BLVD #3109  
City-State-Zip: MIAMI FL 33131

Title MGR  
Name MASCI, COLUMBA  
Address 4 SEASONS LANE  
City-State-Zip: SOUTHAMPTON NY 11968

Title ACCT  
Name SIMON, MURRAY  
Address 15 MONMOUTH PL  
City-State-Zip: MONMOUTH BEACH NJ 07750

*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:** CATHERINE R MASCI

MGR

01/10/2013

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

\_\_\_\_\_  
Date