

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000053218

**Entity Name:** W. ROBINSON & ASSOCIATES, LLC

**Current Principal Place of Business:**

12555 BISCAYNE BOULEVARD  
# 715  
NORTH MIAMI BEACH, FL 33181

**Current Mailing Address:**

P.O. BOX 640953  
NORTH MIAMI BEACH, FL 33162

**FEI Number:** 20-1378520

**Certificate of Status Desired:** No

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

GINSPARG, NORMAN J  
12221 WEST DIXIE HIGHWAY  
NORTH MIAMI, FL 33161 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 ROBINSON, WINDELL  
Address P.O. BOX 640953  
City-State-Zip: NORTH MIAMI BEACH FL 33162

*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:** WINDELL ROBINSON

MGR

04/14/2016

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

\_\_\_\_\_ Date