

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000085763

**Entity Name:** BUTLER POINTE, LLC

**Current Principal Place of Business:**

ONE INDEPENDENT DRIVE SUITE 1880  
JACKSONVILLE, FL 32202

**Current Mailing Address:**

ONE INDEPENDENT DRIVE SUITE 1880  
JACKSONVILLE, FL 32202 US

**FEI Number:** 20-1933081

**Certificate of Status Desired:** No

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

GRUNTHAL, LEONARD HIII  
ONE INDEPENDENT DRIVE SUITE 1880  
JACKSONVILLE, FL 32202 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 GRUNTHAL, LEONARD HIII  
Address ONE INDEPENDENT DRIVE SUITE 1880  
City-State-Zip: JACKSONVILLE FL 32202

Title MGR  
Name SCHUETH, WILLIAM FJR  
Address ONE INDEPENDENT DRIVE SUITE 1880  
City-State-Zip: JACKSONVILLE FL 32202

Title MGR  
Name ANGELO, MARC  
Address 11363 SAN JOSE BLVD, BLDG 300  
City-State-Zip: JACKSONVILLE FL 32223

Title MGR  
Name SCHULTZ, JOHN  
Address 118 WEST ADAMS STREET, SUITE 600  
City-State-Zip: JACKSONVILLE FL 32202

*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:** LEONARD H. GRUNTHAL, III

**MANAGING MEMBER**

**03/25/2014**

Electronic Signature of Signing Authorized Person(s) Detail

Date