

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000019852

**Entity Name:** HOFFNER CENTER, LLC**Current Principal Place of Business:**415 EAST PRINCETON ST.  
ORLANDO, FL 32803**Current Mailing Address:**415 EAST PRINCETON ST.  
ORLANDO, FL 32803**FEI Number:** 20-2443968**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BRENNER, LINDA M  
415 E. PRINCETON ST  
ORLANDO, FL 32803 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
Name	BRENNER, MARC
Address	415 EAST PRINCETON ST.
City-State-Zip:	ORLANDO FL 32803

Title	MGRM
Name	BRENNER, EDWARD
Address	415 E. PRINCETON ST
City-State-Zip:	ORLANDO FL 32803

Title	MGRM
Name	BRENNER, DAVID
Address	415 E. PRINCETON ST
City-State-Zip:	ORLANDO FL 32803

Title	MGRM
Name	WAGNER, SUSAN
Address	415 E. PRINCETON ST
City-State-Zip:	ORLANDO FL 32803

*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:** MARC BRENNER

MGMR

04/21/2014

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