

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000078186

**Entity Name:** 1519 MARSHGRASS, LLC

**Current Principal Place of Business:**

935 HARBOUR BAY DRIVE  
TAMPA, FL 33602

**Current Mailing Address:**

935 HARBOUR BAY DRIVE  
TAMPA, FL 33602

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

GRATZ, MICHAEL E  
935 HARBOUR BAY DRIVE  
TAMPA, FL 33602 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 GRATZ, MICHAEL E  
Address 935 HARBOUR BAY DRIVE  
City-State-Zip: TAMPA FL 33602

Title MGR  
Name HASKIN, WILLIAM B  
Address 2864 BROWNELL AVENUE  
City-State-Zip: SULLIVANS ISLAND SC 29482

*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:** MICHAEL E GRATZ

MGR

04/30/2015

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

\_\_\_\_\_  
Date