## 2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000080050

Entity Name: COURTNEY ISLES, LLC

**Current Principal Place of Business:** 

237 S. WESTMONTE DR., STE 140 ALTAMONTE SPRINGS, FL 32714

**Current Mailing Address:** 

237 S. WESTMONTE DR., STE 140 ALTAMONTE SPRINGS, FL 32714

FEI Number: 20-5430629 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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

FILED Apr 22, 2013

**Secretary of State** 

CC1675059894

Authorized Person(s) Detail:

Title MGRM Title MGRM

Name SCHAFFER, JOHN A Name OGIER, GERALD D

Address 237 S. WESTMONTE DR., STE 140 Address 237 S. WESTMONTE DR., STE 140 City-State-Zip: ALTAMONTE SPRINGS FL 32714 City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title MGRM Title MGRM

Name OGIER, STEVEN Name OGIER, MARK C

Address 237 S. WESTMONTE DR., STE 140 Address 237 S. WESTMONTE DR., STE 140 City-State-Zip: ALTAMONTE SPRINGS FL 32714 City-State-Zip: ALTAMONTE SPRINGS FL 32714

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.

**MGRM** 

SIGNATURE: JOHN SCHAFFER

Electronic Signature of Signing Authorized Person(s) Detail

04/22/2013

Date