2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000085857

Entity Name: ANCHOR ROAD ENTIRETY, LLC

Current Principal Place of Business:

449 TWISTING PINE CIRCLE LONGWOOD, FL 32779

Current Mailing Address:

449 TWISTING PINE CIRCLE LONGWOOD, FL 32779

FEI Number: 20-4145878

Name and Address of Current Registered Agent:

MCGREGOR, DAVID A 449 TWISTING PINE CIRCLE LONGWOOD, FL 32779 US Jan 14, 2014 Secretary of State CC5303966874

FILED

Certificate of Status Desired: No

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 | Title | VP | |
| Name | MCGREGOR, DAVID A | Name | MCGREGOR, FAYE S | |
| Address | 449 TWISTING PINE CIRCLE | Address | 449 TWISTING PINE CIRCLE | |
| City-State-Zip: | LONGWOOD FL 32779 | City-State-Zip: | LONGWOOD FL 32779 | |
| Title Name Address | D MCGREGOR, STEVEN H 449 TWISTING PINE CIRCLE | | | |
| City-State-Zip: | LONGWOOD FL 32779 | | | |

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: DAVID MCGREGOR

MGR

Electronic Signature of Signing Authorized Person(s) Detail