

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000115122

**Entity Name:** 852 FIFTH AVENUE SOUTH, LLC

**Current Principal Place of Business:**

1088 WISCONSIN DR.  
NAPLES, FL 34103

**Current Mailing Address:**

P O BOX 9340  
NAPLES, FL 34101 US

**FEI Number:** 20-4055374

**Certificate of Status Desired:** No

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

CORRADI, MICHAEL K  
1088 WISCONSIN DR.  
NAPLES, FL 34103 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 CORRADI, MICHAEL K  
Address 1088 WISCONSIN DR.  
City-State-Zip: NAPLES FL 34103

*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 K. CORRADI

MGR.

01/29/2015

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

\_\_\_\_\_  
Date