

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000046204

**Entity Name:** 716 OAKWOOD LLC

**Current Principal Place of Business:**

5411 TWIN CREEKS DR.  
VALRICO, FL 33596

**Current Mailing Address:**

5411 TWIN CREEKS DR.  
VALRICO, FL 33596 US

**FEI Number:** 20-4818293

**Certificate of Status Desired:** No

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

SIMPSON, MARK D  
5411 TWIN CREEKS DR  
VALRICO, FL 33596 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 SIMPSON, MARK D  
Address 5411 TWIN CREEKS DR.  
City-State-Zip: VALRICO FL 33596

*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.*

**SIGNATURE:** MARK D. SIMPSON

**MANAGING MEMBER**

**01/29/2013**

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

\_\_\_\_\_  
Date