

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000066701

**Entity Name:** 03-22-18, LLC

**Current Principal Place of Business:**

9040 TRYFON BOULEVARD  
A-103  
TRINITY, FL 34655

**Current Mailing Address:**

9040 TRYFON BOULEVARD  
A-103  
TRINITY, FL 34655

**FEI Number:** 56-2669008

**Certificate of Status Desired:** No

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

HUSSEY, MELISSA M  
9040 TRYFON BOULEVARD  
A-103  
TRINITY, FL 34655 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 DCEO  
Name PLANES, WILLIAM  
Address 9040 TRYFON BOULEVARD, SUITE A-103  
City-State-Zip: TRINITY FL 34655

Title DT  
Name PLANES, REGINA M  
Address 9040 TRYFON BOULEVARD, SUITE A-103  
City-State-Zip: TRINITY FL 34655

*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:** WILLIAM P. PLANES SR

**DIRECTOR**

**04/30/2013**

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

\_\_\_\_\_  
Date