

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000039927

**Entity Name:** 12125 COLLIER BLVD., LLC

**Current Principal Place of Business:**

800 GIFFORD ST EXT  
FALMOUTH, MA 02540

**Current Mailing Address:**

800 GIFFORD STREET EXT  
FALMOUTH, MA 02540

**FEI Number:** 26-2453340

**Certificate of Status Desired:** Yes

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

GRANT, SCOTT MESQ.  
SCOTT M. GRANT P.A.  
3337 TAMiami TRAIL NORTH  
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 MGR  
Name BURKE, ROBERT F  
Address 800 GIFFORD ST EXT  
City-State-Zip: FALMOUTH MA 02540

*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:** ROBERT BURKE

MGR

01/25/2016

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

\_\_\_\_\_ Date