

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000045303

Entity Name: 160 POINTE LOOP DR. ,LLC

Current Principal Place of Business:

21 JENNIFER DR.
HOLMDEL, NJ 07733

Current Mailing Address:

21 JENNIFER DR.
HOLMDEL, NJ 07733 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LARSEN, WAYNE MR
2061 SE HARLOW ST.
PORT ST.LUCIE, FL 34952 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 LARSEN, GLENN
Address 21 JENNIFER DR.
City-State-Zip: HOLMDEL NJ 07733

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: GLENN LARSEN

OWNER

03/04/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date