

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000081143

**Entity Name:** TWIN CREEKS CINEMA, LLC

**Current Principal Place of Business:**

2828 RICHBURG LANE  
CRESTVIEW, FL 32539

**Current Mailing Address:**

P.O. BOX 1524  
GULF BREEZE, FL 32562

**FEI Number:** 26-3246863

**Certificate of Status Desired:** No

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

OFFERDAHL, NELS P  
1233 CRANE COVE BLVD  
GULF BREEZE, FL 32563 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	Title	MGRM
Name	OFFERDAHL, NELS P	Name	OFFERDAHL, ABBIE L
Address	1233 CRANE COVE BLVD	Address	1233 CRANE COVE BLVD
City-State-Zip:	GULF BREEZE FL 32563	City-State-Zip:	GULF BREEZE FL 32563

*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:** NELS OFFERDAHL

**MGR MEMBER**

**03/28/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date