

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000011680

**Entity Name:** OLD CARRABELLE HOTEL, LLC

**Current Principal Place of Business:**

201 TALLAHASSEE STREET  
CARRABELLE, FL 32322

**Current Mailing Address:**

P O BOX 1157  
CARRABELLE, FL 32322

**FEI Number:** 27-2363676

**Certificate of Status Desired:** No

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

FRINK, MARY K  
201 TALLAHASSEE STREET  
CARRABELLE, FL 32322 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 FRINK, MARY K  
Address 201 TALLAHASSEE STREET  
City-State-Zip: CARRABELLE FL 32322

Title MGRM  
Name FRINK, HORACE E III  
Address 201 TALLAHASSEE STREET  
City-State-Zip: CARRABELLE FL 32322

Title MGRM  
Name BROWN, WILLIAM  
Address 4830 DUNWOODY JUNCTION  
City-State-Zip: ATLANTA GA 30338

*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:** MARY K. FRINK

MGRM

03/08/2016

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

\_\_\_\_\_ Date