

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000116172

**Entity Name:** 22 AVE N ST PETE, LLC

**Current Principal Place of Business:**

6672 GROVER CLEVELAND BLVD  
HOMOSASSA, FL 34446

**Current Mailing Address:**

6672 GROVER CLEVELAND BLVD  
HOMOSASSA, FL 34446

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

ANDREWS, LAWRENCE W  
6672 GROVER CLEVELAND BLVD  
HOMOSASSA, FL 33446 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 ANDREWS, LAWRENCE W  
Address 6672 GROVER CLEVELAND BLVD  
City-State-Zip: HOMOSASSA FL 34446

Title MGRM  
Name SIMMONS, CAROL A  
Address 6672 GROVER CLEVELAND BLVD.  
City-State-Zip: HOMOSASSA FL 34446

*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:** CAROL A SIMMONS

MGRM

04/15/2013

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

\_\_\_\_\_  
Date