

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000120208

**Entity Name:** SWIRNOW L-A V, LLC

**Current Principal Place of Business:**

4000 HOLLYWOOD BLVD., STE 375-S  
C/O JERALD C. CANTOR, ESQ.  
HOLLYWOOD, FL 33021

**Current Mailing Address:**

4000 HOLLYWOOD BLVD., STE 375-S  
C/O JERALD C. CANTOR, ESQ.  
HOLLYWOOD, FL 33021

**FEI Number:** 20-4110896

**Certificate of Status Desired:** No

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

CANTOR, JERALD C  
4000 HOLLYWOOD BLVD., STE 375-S  
HOLLYWOOD, FL 33021 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 B. ROBERTA SWIRNOW TRUST  
Address 4000 HOLLYWOOD BLVD., STE 375-S  
City-State-Zip: HOLLYWOOD FL 33021

Title MGR  
Name POWERS, ROBERT MGR  
Address 500 HARBORVIEW DRIVE 3RD FLOOR  
City-State-Zip: BALTIMORE MD 21230

*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 POWERS**

**MANAGER**

**03/10/2014**

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

\_\_\_\_\_  
Date