

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000021071

Entity Name: WOODS, WEIDENMILLER, MICHETTI, RUDNICK & GALBRAITH, PLLC**FILED**
Mar 28, 2016
Secretary of State
CC2287230324**Current Principal Place of Business:**9045 STRADA STELL COURT
FOURTH FLOOR
NAPLES, FL 34109**Current Mailing Address:**9045 STRADA STELL COURT
FOURTH FLOOR
NAPLES, FL 34109 US**FEI Number: 27-1984393****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**WEIDENMILLER, CASEY K
9045 STRADA STELL COURT
FOURTH FLOOR
NAPLES, FL 34109 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 WEIDENMILLER, CASEY K
Address 9045 STRADA STELL COURT
FOURTH FLOOR
City-State-Zip: NAPLES FL 34109

Title MGRM
Name MICHETTI, MICHAEL L
Address 9045 STRADA STELL COURT
FOURTH FLOOR
City-State-Zip: NAPLES FL 34109

Title MGRM
Name WOODS, GREGORY N
Address 9045 STRADA STELL COURT
FOURTH FLOOR
City-State-Zip: NAPLES FL 34109

Title AMBR
Name GALBRAITH, BRAD A
Address 9045 STRADA STELL COURT
FOURTH FLOOR
City-State-Zip: NAPLES FL 34109

Title MGRM
Name RUDNICK, JOSHUA D
Address 9045 STRADA STELL COURT
FOURTH FLOOR
City-State-Zip: NAPLES FL 34109

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: MICHAEL L MICHETTI**MGRM****03/28/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date