

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000032799

**Entity Name:** ORIOLE ROAD, LLC

**Current Principal Place of Business:**

16450-3 S. TAMIAMI TRAIL  
#114  
FORT MYERS, FL 33908

**Current Mailing Address:**

16450-3 S. TAMIAMI TRAIL  
#114  
FORT MYERS, FL 33908 US

**FEI Number:** 27-2252556

**Certificate of Status Desired:** No

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

ALOIA, FRANK JJR.  
2250 FIRST STREET  
FORT MYERS, FL 33901 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 BOHN, SALLY J TRUSTEE  
Address 16450-3 S. TAMIAMI TRAIL  
#114  
City-State-Zip: FORT MYERS FL 33908

*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:** SALLY J BOHN

MGRM

01/23/2014

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

\_\_\_\_\_ Date