

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000070315

Entity Name: SCENIC POINTE, LLC

Current Principal Place of Business:

827 SCENIC POINTE
PRESCOTT, AZ 86303

Current Mailing Address:

DAVID A HOLMES, ESQ.
99 NESBIT STREET
PUNTA GORDA, FL 33950

FEI Number: 27-3009652

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HOLMES, DAVID A
FARR,FARR,EMERICH,HACKETT AND CARR, P.A.
99 NESBIT STREET
PUNTA GORDA, FL 33950 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	MGR	Title	MGR
Name	HAENRAETS, HUBERTUS M.	Name	HAENRAETS, SANDRA J.
Address	827 SCENIC POINTE	Address	827 SCENIC POINTE
City-State-Zip:	PRESCOTT AZ 86303	City-State-Zip:	PRESCOTT AZ 86303

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: HUBERTUS M. HAENRAETS

MANAGER

03/21/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date