I hereby certify that the information indicated on this report or supplemental report is true and ac	curate and that my electronic signature shall have the	e 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: DAVID HOFFMANB	MGR	04/26/2015			

Electronic Signature of Signing Authorized Person(s) Detail

**Current Principal Place of Business:** 1011 SE 40TH STREET CAPE CORAL, FL 33904

# **Current Mailing Address:**

**70 SOUTH MAIN STREET** PITTSFORD, NY 14534 US

# FEI Number: 37-1616072

### Name and Address of Current Registered Agent:

DUFAULT, PAUL 1011 SE 40TH STREET CAPE CORAL, FL 33904 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	: PAUL DUFAULT			04/26/2015
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MGR	Title	MGRM	
Name	HOFFMAN, DAVID	Name	DUFAULT, PAUL	
Address	1011 SE 40TH STREET	Address	70 SOUTH MAIN STREET	
City-State-Zip:	CAPE CORAL FL 33904	City-State-Zip:	PITTSFORD NY 14534	

# Certificate of Status Desired: Yes

# 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L10000121161

### Entity Name: PITTSFORD REDEVELOPMENT LLC

Apr 26, 2015 Secretary of State CC8261142213

FILED

Date