

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000000542

**Entity Name:** KESSEL ST. PETE, LLC

**Current Principal Place of Business:**

9132 STRADA PLACE, FOURTH FLOOR  
C/O LEO J. SALVATORI  
NAPELS, FL 34108

**Current Mailing Address:**

P.O. BOX 47375  
TAMPA, FL 33646 US

**FEI Number:** 27-4465743

**Certificate of Status Desired:** No

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

SALVATORI, WOOD & BUCKEL, PL  
9132 STRADA PLACE, FOURTH FLOOR  
NAPELS, FL 34108 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:** LEO J. SALVATORI

01/22/2014

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name KESSEL, JAMES R  
Address P.O. BOX 47375  
City-State-Zip: TAMPA FL 33646

*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:** JAMES R. KESSEL

MANAGER

01/22/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date