

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000046389

**FILED**  
**Mar 06, 2014**  
**Secretary of State**  
**CC2776059777**

**Entity Name:** MAIN STREET RESIDENTIAL MAPLE GLEN HOLDINGS ONE, LLC

**Current Principal Place of Business:**

250 TEQUESTA DRIVE  
SUITE 202  
TEQUESTA, FL 33469

**Current Mailing Address:**

250 TEQUESTA DRIVE  
SUITE 202  
TEQUESTA, FL 33469 US

**FEI Number:** 45-1831575

**Certificate of Status Desired:** No

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

LAW OFFICES OF PAUL A. LESTER, P.A.  
9150 S. DADELAND BOULEVARD  
SUITE 1400  
MIAMI, FL 33156 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	MARSHALL, TODD C	Name	MARSHALL, CRAIG S
Address	250 TEQUESTA DRIVE SUITE 202	Address	250 TEQUESTA DRIVE SUITE 202
City-State-Zip:	TEQUESTA FL 33469	City-State-Zip:	TEQUESTA FL 33469

  

Title	MGR
Name	LESTER, PAUL A
Address	9150 S. DADELAND BOULEVARD, SUITE 1400
City-State-Zip:	MIAMI FL 33156

*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:** CRAIG S MARSHALL

**MGR**

**03/06/2014**

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

\_\_\_\_\_  
Date