

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000077975

**Entity Name:** 16451 GULF BOULEVARD CROSSINGS, LLC

**Current Principal Place of Business:**

15429 NORTH FLORIDA AVENUE  
TAMPA, FL 33613

**Current Mailing Address:**

15429 NORTH FLORIDA AVENUE  
TAMPA, FL 33613

**FEI Number:** 45-2688763

**Certificate of Status Desired:** No

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

SULLIVAN, MATTHEW BESQ.  
630 CHESNUT STREET  
CLEARWATER, FL 33756 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 GHANNAD, SARA  
Address 15429 NORTH FLORIDA AVENUE  
City-State-Zip: TAMPA FL 33613

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** SARA GHANNAD

MGRM

01/24/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date