

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000086544

Entity Name: MDS 1717 S ORANGE AVENUE, LLC

Current Principal Place of Business:

324 W GORE STREET
ORLANDO, FL 32806

Current Mailing Address:

324 W GORE STREET
ORLANDO, FL 32806

FEI Number: 45-2803248

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SWANN HADLEY STUMP DIETRICH & SPEARS
1031 W MORSE BOULEVARD
SUITE 350
WINTER PARK, FL 32789 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: RICHARD SWANN

04/23/2014

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name MEARS DESTINATION SERVICES, INC.
Address 324 W GORE STREET
City-State-Zip: ORLANDO FL 32806

Title MGRM
Name SAGACIOUS HOLDINGS, LLC
Address 1020 WALD ROAD
City-State-Zip: ORLANDO FL 32806

Title MGRM
Name WOODARD PROPERTIES, INC.
Address 1111 LAKE WELDONA DRIVE
City-State-Zip: ORLANDO FL 32806

Title MGRM
Name BAKER, TIMOTHY L
Address 324 W GORE STREET
City-State-Zip: ORLANDO FL 32806

Title MGRM
Name VOISIN, JOSEPH B
Address 324 W GORE STREET
City-State-Zip: ORLANDO FL 32806

Title AUTHORIZED MEMBER
Name FORD, DANIEL W
Address 324 W GORE STREET
City-State-Zip: ORLANDO FL 32806

Title AUTHORIZED MEMBER
Name CHAPIN, ROGER E
Address 324 W GORE STREET
City-State-Zip: ORLANDO FL 32806

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: TIMOTHY L BAKER

MEMBER

04/23/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date