

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000097458

**Entity Name:** BUSINESS CENTER 54, LLC

**Current Principal Place of Business:**

505 E. JACKSON STREET  
102  
TAMPA, FL 33602

**Current Mailing Address:**

505 E. JACKSON STREET  
102  
TAMPA, FL 33602

**FEI Number:** 45-3090513

**Certificate of Status Desired:** No

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

HUTCHCRAFT, WILLIAM  
505 E. JACKSON STREET  
102  
TAMPA, FL 33602 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 HUTCHCRAFT, WILLIAM  
Address 505 E. JACKSON STREET STE 102  
City-State-Zip: TAMPA FL 33602

*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:** WILLIAM HUTCHCRAFT

MGRM

02/06/2013

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

\_\_\_\_\_  
Date