

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000116696

**Entity Name:** LTB ENTERPRISES, LLC

**Current Principal Place of Business:**

1101 N. LAKE DESTINY ROAD  
SUITE 200  
MAITLAND, FL 32751

**Current Mailing Address:**

1101 N. LAKE DESTINY ROAD  
SUITE 200  
MAITLAND, FL 32751

**FEI Number:** 45-3632036

**Certificate of Status Desired:** No

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

MURPHY, JODI E  
1111 DOUGLAS AVENUE  
ALTAMONTE SPRINGS, FL 32714 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	BROWN, L. THOMAS	Name	BROWN, ARLENE L
Address	1101 N. LAKE DESTINY ROAD, SUITE 200	Address	1101 N. LAKE DESTINY ROAD, SUITE 200
City-State-Zip:	MAITLAND FL 32751	City-State-Zip:	MAITLAND FL 32751

*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:** L. THOMAS BROWN

**PRESIDENT**

**01/12/2015**

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

\_\_\_\_\_  
Date