## 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000139969

Entity Name: TAMARA A. WRIGHT, LLC

Entity Name. TAWARA A. WRIGHT, LLC

**Current Principal Place of Business:** 

508 DEVILS LANE NAPLES, FL 34103

**Current Mailing Address:** 

508 DEVILS LANE NAPLES, FL 34103 US

FEI Number: 45-4028210 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WRIGHT, TAMARA A 508 DEVILS LANE NAPLES, FL 34103 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

FILED Apr 15, 2014

**Secretary of State** 

CC3917255286

## Authorized Person(s) Detail:

Title MGR

Name WRIGHT, TAMARA A
Address 508 DEVILS LANE
City-State-Zip: NAPLES FL 34103

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: TAMARA WRIGHT

Electronic Signature of Signing Authorized Person(s) Detail

MANAGER

04/15/2014

Date