

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000139969

Entity Name: TAMARA 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

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

SIGNATURE: TAMARA WRIGHT

MANAGER

09/17/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date