

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000074744

**Entity Name:** FORTIS TWIN CREEKS, LLC

**Current Principal Place of Business:**

4401 WEST KENNEDY BLVD  
THIRD FLOOR  
TAMPA, FL 33609

**Current Mailing Address:**

4401 WEST KENNEDY BLVD  
THIRD FLOOR  
TAMPA, FL 33609 US

**FEI Number:** 45-5445348

**Certificate of Status Desired:** No

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

PALERMO, JAMES D  
15436 NORTH FLORIDA AVENUE  
SUITE 200  
TAMPA, FL 33613 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 KOBEL, EDWARD M  
Address 4401 W. KENNEDY BOULEVARD - 3RD  
FLOOR  
City-State-Zip: TAMPA FL 33613

*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:** EDWARD M. KOBEL

MGRM

05/01/2013

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

\_\_\_\_\_  
Date