

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000119243

**Entity Name:** 580 FIFTEENTH AVENUE SOUTH, LLC

**Current Principal Place of Business:**

1672 JEWEL BOX AVENUE  
NAPLES, FL 34102

**Current Mailing Address:**

1672 JEWEL BOX AVENUE  
NAPLES, FL 34102

**FEI Number:** 46-1035432

**Certificate of Status Desired:** No

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

SHUMAKE, JIM D  
900 SIXTH AVENUE SOUTH  
SUITE 202  
NAPLES, FL 34102 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 BUSSELL, CLIFFORD J  
Address 1672 JEWEL BOX AVENUE  
City-State-Zip: NAPLES FL 34102

Title MGR  
Name PLANO, VITO  
Address 4101 NE 34TH AVENUE  
City-State-Zip: FT. LAUDERDALE FL 33308

Title MGR  
Name LAUCH, LOUIS  
Address 950 KENT ROAD  
City-State-Zip: BATAVIA OH 45103

Title MANAGING MEMBER  
Name LAUCH, FRANK  
Address 950 KENT RD  
City-State-Zip: BATAVIA OH 45103

*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:** FRANK LAUCH

MANAGING MEMBER

03/04/2013

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

\_\_\_\_\_  
Date