

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000150569

**Entity Name:** 4395 CORPORATE SQUARE, LLC

**Current Principal Place of Business:**

4395 CORPORATE SQUARE  
NAPLES, FL 34104

**Current Mailing Address:**

4395 CORPORATE SQUARE  
NAPLES, FL 34104 US

**FEI Number:** 46-1526332

**Certificate of Status Desired:** No

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

MARK H. MULLER, P.A.  
5150 TAMiami TRAIL NORTH  
SUITE 303  
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	Title	SECRETARY, TREASURER
Name	BUDD, RUSSELL A	Name	ORTEGON, KIMBERLY A
Address	5981 SHADY OAKS LANE	Address	4395 CORPORATE SQUARE
City-State-Zip:	NAPLES FL 34119	City-State-Zip:	NAPLES FL 34104

*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:** KIMBERLY A. ORTEGON

CFO

01/12/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date