

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000154979

**Entity Name:** 4151 GULF SHORES BLVD. NORTH LLC

**Current Principal Place of Business:**

6845 WEAVER ROAD  
SUITE 200  
ROCKFORD, IL 61114

**Current Mailing Address:**

330 SPRING CREEK ROAD  
ROCKFORD, IL 61107 US

**FEI Number:** 46-1662655

**Certificate of Status Desired:** Yes

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

NRAI SERVICES, INC.  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 LOESCHER, DAN G  
Address 6845 WEAVER ROAD, SUITE 200  
City-State-Zip: ROCKFORD IL 01114

*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: DAN LOESCHER

MANAGER

01/07/2015

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

\_\_\_\_\_ Date